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(54) Title: USE OF DOCOSAHEXANOIC ACID AND ARACHIDONIC ACID ENHANCING THE GROWTH OF PRETERM INFANTS

(57) Abstract

A method for enhancing the growth of preterm infants involving the administration of certain long chain polyunsaturated fatty acids. It is preferred that the infants are administered an infant formula containing a combination of docohexaenoic acid and arachidonic acid.

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USE OF DOCOSAHEXANOIC ACID AND ARACHIDONIC ACID ENHANCING THE GROWTH OF PRETERM INFANTS

Field of Invention

The present invention concerns enhancing the growth of preterm infants involving administration of infant formula containing a combination of docosahexaenoic and arachidonic acid.

Background of the Invention

The long chain polyunsaturated fatty acids (LC PUFA) have been shown to be important in infant development. Particularly, arachidonic acid (ARA) and docosahexaenoic acid (DHA) are LC PUFA that are of special interest in infant nutrition because they are found in high concentrations in the brain (Sastry PS, Lipids of nervous tissue: composition and metabolism. Progress Lipid Res 1985;24:69-176) and the retina (Fliesler SJ and Anderson RE. Chemistry and metabolism of lipids in the vertebrate retina. Progress Lipid Res 1983;22:79-131). ARA (20:4n-6) and DHA (22:6n-3) are derived from the parent essential fatty acids linoleic acid (18:2n-6) and α-linolenic acid (18:3n-3) through alternate desaturation and elongation and accumulate rapidly in fetal neural tissue during the last months of gestation and the first months of postnatal life (Makrides M, Neuman MA, Byard RW, Simmer K, Gibson RA. Fatty composition of the brain, retina and erythrocytes in breast- and formula-fed infants. Am J Clin Nutr 1994;60:189-94).

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Unlike term infants, preterm infants do not fully benefit from the maternal and placental LC PUFA supply during the last trimester of pregnancy. Even though preterm infants are capable of synthesizing both DHA and ARA from their 18 carbon precursors (Carnielli VP, Wattimena DJL, Luijendijk IHT, Boerlage A, Degenhart HJ, Sauer PJJ. The very low birth weight premature infant is capable of synthesizing arachidonic and docosahexaenoic acids from linoleic and linolenic acids. Pediat Res 1996;40:169-174), it remains unclear whether the rate of synthesis is adequate to meet the optimal needs for central nervous system accretion in the absence of a dietary supply of these fatty acids. Preterm infants are dependent on their own dietary supply of linoleic and α-linolenic acids through either human milk, which also contains small but significant amounts of ARA and DHA or through commercially available artificial formulas, none of which in the United States contain ARA and DHA.

It has been demonstrated in recent studies (Hoffman DR and Uauy R. Essentiality of dietary ω-3 fatty acids for premature infants: Plasma and red blood cell fatty acid composition. Lipids 1992;27:886-95) that the fatty acid composition of red blood cell membrane lipids in infants receiving formulas supplemented with DHA (0.35% of total fatty acids) was similar to human milk-fed infants. In the same study, Birch (Birch DG, Birch EE, Hoffman DR, Uauy RD. Retinal development in very-low-birth-weight infants fed diets differing in Omega-3 fatty acids. Investigation Ophthalmology Visual Science 1992;33:2365-76) found that retinal function improved with the provision of a dietary supply of DHA in very low birth weight infants.

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The first year growth of preterm infants fed standard formula compared to marine oil LC PUFA supplemented formula was studied by Carlson et al. (Carlson SE, Cooke, RJ, Werkman SH, Tolley EA. First year growth of preterm infants fed standard compared to marine oil n-3 supplemented formula. Lipids 1992:27:901-907). The experimental formulas provided 0.2% of total fatty acids as DHA and also provided 0.3% as EPA (20:5n-3). This EPA concentration is higher than found in human milk while the DHA level is similar to human milk. Beginning at 40 weeks from conception, marine oil supplemented infants compared to controls had significantly lower weight, length, and head circumference. From this study, Carlson (Carlson SE, Werkman SH, Peeles JM, Cooke RJ, Tolley EA. Arachidonic acid status correlates with first year growth in preterm infants. Proc Natl Acad Sci USA 1993;90:1073-77) hypothesized that dietary ARA could improve first year growth of preterm infants, in the context of restoring growth to the level of control formula containing no LC PUFA.

In another study (Montalto, FB, et al., Pediatric Research, Vol 39, page 316A, abstract no. 1878) it was shown that male infants fed marine oil supplemented formula (containing DHA but essentially no ARA) had, by 4 to 6 months, lower head circumference, length, weight and fat free mass than standard formula fed infants. A third study also showed decreased weight at 9 and 12 months corrected age in preterm infants fed marine oil supplemented formula (with LC PUFA) to 2 months corrected age compared with control formula containing no LC PUFA (Carlson SE, et al., Am. J. Clin. Nutr., 63 pp 687-97, 1996).

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The prior art has demonstrated that infants with altered tissue LC PUFA levels, resulting from a lack of LC PUFA in their diets, may be at risk for neurological problems, may also have reduced scores on cognitive tests, and may have lower retinal development than human milk-fed infants. Worldwide regulatory organizations such as the WHO/FAO Expert Committee on Fats and Oils in Human Nutrition have recommended that LC PUFA be included in preterm infant formula. These recommendations have been made despite the negative effects observed of DHA supplements on growth. There has been no demonstration in the literature that ARA and DHA, particularly when added to infant formula, enhances the growth of infants above that demonstrated by control formulas not containing ARA and DHA.

Summary of the Invention

It has unexpectedly been discovered that preterm infants receiving infant formula supplemented with both DHA and ARA demonstrate enhanced growth. The present invention is directed to enhancing the growth of preterm infants comprising administering to said infants a growth enhancing amount of DHA and ARA.

Detailed Description of the Invention

As reported in a review of preterm infant growth by Carlson, SE, (The Jrnl of Pediatrics, vol 125, pp 533-8, 1994) "After adjusting for postconceptional age, preterm infants show a decline (rather

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than a catch-up) in the normalized weight from approximately 2 to 4 months past expected term."

Several prior art studies have documented the value of administering DHA to infants. However, when DHA, either as the primary LC PUFA or combined with EPA, is administered to preterm infants, said infants suffer from decreased growth. It has been suggested that ARA may be beneficial to growth; however, heretofore the growth effects of administering both DHA and ARA to preterm infants have been unknown. It has been surprisingly discovered that administering the combination of ARA and DHA results in enhanced growth of infants relative to infants fed DHA alone. It has also been discovered that preterm infants administered an infant formula containing ARA and DHA exhibit enhanced growth relative to preterm infants fed control formula without DHA and ARA, such as those formulas currently used in modern nurseries. It has further been discovered that practice of the method of the invention results in growth of preterm infants catching up in an unexpected short time to a reference group of normal term breast fed infants.

The time to achieve growth similar or equivalent to normal term breast fed infants by practice of the method of the invention is less than 9 months corrected age; preferably less than 6 months corrected age, more preferably less than 4 months corrected age, even more preferably less than 2 months corrected age, and most preferably no greater than term corrected age.

The method of the invention requires a combination of DHA and ARA. The weight ratio weight of ARA:DHA can be about 1:2 to about 5:1, preferably about 1:1 to about 3:1, and more preferably

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about 2:1.

In the method of the invention the combination of DHA and ARA is preferably administered as part of an infant formula. The infant formula for use in the present invention is preferably nutritionally complete and typically contains suitable types and amounts of lipid, carbohydrate, protein, vitamins and minerals. The amount of lipid or fat typically can vary from about 3 to about 7 g/100 kcal. The amount of protein typically can vary from about 1 to about 5 g/100 kcal. The amount of carbohydrate typically can vary from about 8 to about 12 g/100 kcal. Protein sources can be any used in the art, e.g., nonfat milk, whey protein, casein, soy protein, hydrolyzed protein, amino acids, and the like. Carbohydrate sources can be any used in the art, e.g., lactose, glucose, corn syrup solids, maltodextrins, sucrose, starch, rice syrup solids, and the like. Lipid sources can be any used in the art, e.g., vegetable oils such as palm oil, soybean oil, palmolein, coconut oil, medium chain triglyceride oil, high oleic sunflower oil, high oleic safflower oil, and the like. Conveniently, commercially available infant formula can be used. For example, Enfamil®, Enfamil® Premature Formula, Enfamil® with Iron, Lactofree®, Nutramigen®, Pregestimil®, ProSobee® (available from Mead Johnson & Company, Evansville, Indiana, U.S.A.), Similac®, Isomil®, Alimentum®, Neocare®, and Similac® Special Care (available from Ross Laboratories, Columbus, Ohio, U.S.A.), may be supplemented with suitable levels of ARA and DHA at the proper ratios and used in practice of the method of the invention.

The form of administration of the DHA and ARA in the method of the invention is not critical, as

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long as a growth enhancing amount is administered. Most conveniently, the DHA and ARA are supplemented into infant formula which is then fed to the infants. Alternatively, the DHA and ARA can be administered as a supplement not integral to the formula feeding, for example, as oil drops, sachets, in combination with other nutrient supplements such as vitamins, and the like.

The growth enhancing amount of DHA is typically about 2.5 mg/kg of body weight/day to about 60 mg/kg of body weight/day, preferably about 6 mg/kg of body weight/day to about 40 mg/kg of body weight/day, more preferably about 12 mg/kg body weight/day to about 30 mg/kg body weight/day, and even more preferably about 18 mg/kg of body weight/day to about 24 mg/kg of body weight/day.

The growth enhancing amount of ARA is typically about 5 mg/kg of body weight/day to about 120 mg/kg of body weight/day, preferably about 12 mg/kg of body weight/day to about 80 mg/kg of body weight/day, more preferably about 24 mg/kg body weight/day to about 60 mg/kg body weight/day, and even more preferably about 36 mg/kg of body weight/day to about 48 mg/kg body weight/day.

The amount of DHA in infant formulas for use in the present invention typically varies from about 2 mg/100 kilocalories (kcal) to about 50 mg/100 kcal, preferably about 5 mg/100 kcal to about 33 mg/100 kcal, more preferably about 10 mg/100 kcal to about 25 mg/100 kcal, and even more preferably about 15 mg/100 kcal to about 20 mg/100 kcal.

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The amount of ARA in infant formula for use in the present invention typically varies from about 4 mg/100 kcal to about 100 mg/100 kcal, preferably about 10 mg/100 kcal to about 67 mg/100 kcal, more preferably about 20 mg/100 kcal to about 50 mg/100 kcal, and even more preferably about 30 mg/100 kcal to about 40 mg/100 kcal.

The infant formula supplemented with oils containing DHA and ARA for use in the present invention can be made using standard techniques known in the art. For example, replacing an equivalent amount of an oil normally present, e.g., high oleic sunflower oil.

The source of the ARA and DHA can be any source known in the art such as fish oil, single cell oil, egg yolk lipid, brain lipid, and the like. The DHA and ARA can be in natural form, provided that the remainder of the LC PUFA source does not result in any substantial deleterious effect on the infant. Alternatively, the DHA and ARA can be used in refined form. It is preferred that the LC PUFA used in the invention contain little or no EPA. For example, it is preferred that the infant formulas used herein contain less than about 20 mg/100 kcal EPA; preferably less than about 10 mg/kcal EPA; more preferably less than about 5 mg/100 kcal EPA; and most preferably substantially no EPA.

Preferred sources of DHA and ARA are single cell oils as taught in U.S. patent nos. 5,374,657, 5,550,156, and 5,397,591, the disclosures of which are incorporated herein by reference in their entirety.

The following examples are to illustrate the invention but should not be interpreted as a limitation thereon.

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EXAMPLES

I CLINICAL STUDY DESIGN

1. INTRODUCTION

This study is a double-blind, randomized, controlled parallel design, prospective trial of premature infant formulas containing microalgae and fungi-derived oils which contain a part of their constituents arachidonic acid and docosohexaenoic acid. Formula feeding subjects will be randomized into one of 3 feeding groups:

- premature formula plus DHA (about 0.13% of energy) and ARA (about 0.26% of energy)
- premature formula plus DHA (about 0.13% of energy)
- premature formula WITHOUT DHA and ARA

The products have the same nutrient composition (see Appendix A) and differ only in the level of DHA and ARA. The products will be blinded. The present order of formula has no relationship to randomization.

Normal, term, breast fed infants will be enrolled to provide a normal visual acuity reference.

Fifty evaluable subjects will be completed in each group. Premature infants will remain on study formulas after reaching 90 kcal/kg/d for a minimum of 28 days or until hospital discharge whichever is longer. After 28 days or discharge, whichever is longer, all premature infants will receive Enfamil or Enfalac with Iron. If medically indicated, ProSobee, Lactofree, Alactamil, Nutramigen, or Pregestimil may be used in place of Enfamil or Enfalac with Iron. Term infants will receive at least 85% of their nutrition from breast milk. Primary measures of effectiveness will include visual acuity and red blood cell membrane fatty acid profiles (i.e. DHA and ARA levels). The measure of safety will be growth and adverse experience reports.

2. SUBJECTS

2.1 SOURCE AND CHARACTERIZATION OF STUDY GROUP

Acceptable preterm subjects will be relatively healthy premature infants taking

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preterm formula. Anticipated hospitalization should be sufficient to allow for 28 days of enteral intake \geq 90 kcal/kg/d and \geq 85% study formula intake. All races and both sexes will be eligible for the study.

2.2 INCLUSION CRITERIA

Preterm infants

- Birth weight ≥ 900 g
- Formula feeding at time of study enrollment
- . Anticipate enteral intake of ≥ 90 kcal/kg/day for ≥ 28 days before discharge home
- . Informed consent obtained

Term Infants:

- . 38 to 42 weeks gestation
- . Committed to breast feeding
- . Informed Consent obtained

2.3 EXCLUSION CRITERIA

Preterm infants

≥1500 g at birth

Preterm and Term Infants:

- . History of underlying disease or congenital malformation which in the opinion of the investigator is likely to interfere with the evaluation of the subject
- . More than 24 days between birth and full oral feeds (≥ 90 kcal/kg/d)
- . Small (<10th percentile) for gestational age at birth (SGA)
- . Necrotizing enterocolitis as diagnosed by the physician

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- Other gastrointestinal disease
- Impaired visual or ocular status at birth

2.4 CONCOMITANT MEDICATIONS, HOSPITALIZATIONS, ILLNESSES

- . No medication which may effect FPL response may be used within 3 days of measurement.
 - No evidence of viral of bacterial infection during FPL testing.
- . No medications known to effect lipid metabolism (e.g., heparin at therapeutic levels)

STUDY PRODUCT INFORMATION

3.1 FORMULATIONS

Nutrient composition is included as Appendix A.

4. STUDY PROCEDURES

4.2.1 ENROLLMENT

Enrollment will take place over a 6 month period. Ideally, sufficient subjects will be enrolled so that 10 subjects in each group complete the study at each site for the multi-center trial. A total of 50 infants per formula group will complete this trial.

4.2.2 SCHEDULE OF EVENTS (SEE FLOW CHART, SECTION 8.4)

4.2.2.1 RECRUITMENT

Mothers of eligible, healthy, preterm formula fed infants and term, breastfed infants will be contacted, the study explained to them, and if they are agreeable, written informed consent obtained.

Term infants may be enrolled anytime from birth until or during the 48 week visit.

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4.2.2.2 RANDOMIZATION

Recruited formula fed subjects will be randomized into study groups. Randomization can occur anytime after enteral feeds reach 50 kcal/kg/day until commencement of full enteral feeds (i.e., ≥90 kcal/kg/day).

4.2.2.3 FEEDING

All premature infants will receive their assigned study formula after informed consent has been granted and enteral feeds are at least 50 kcal/kg/day. The infant will remain on study formula 28 days after reaching 90 kcal/kg/d or until hospital discharge, whichever is longer. Oral feeding amount, strength and rate will advance as appropriate for the clinical management of the infant.

All parents will be instructed not to feed solid foods during the study. The parents will be instructed that the study formula or breast milk is to serve as the sole source of food from enrollment to study end.

4.2.2.4 BASELINE DATA COLLECTION

The following data will be collected by the Investigator at the time of enrollment and randomization on the case report forms:

- . Informed consent of parent obtained.
- . Post conceptual age.
- That the subject is a premature infant, with Birth weight ≥900 gm and ≥1500 gm or a normal term infant between 38 and 42 weeks gestational age.
- That the preterm subject is receiving infant formula or term infant is committed to breast feeding.
- Anticipated preterm infant enteral intake of ≥90 kcal/kg/day for ≥28 days prior to discharge home.
- That the subject has no history of underlying disease, inborn error of metabolism, or congenital malformation which in the opinion of the Investigator is likely to interfere with the evaluation of the study formulas.

- That the subject is not small (<10th percentile) for gestational age at birth.
- That the subject does not have necrotizing enterocolitis as diagnosed by a physician.
- That the subject does not have a gastrointestinal disease.
- No more than 24 days between birth and full enteral feeds (i.e., ≥90 kcal/kg/day).
- . That the subject did not have impaired visual or ocular status at birth.
 - Birth date, sex, race.
 - Birth weight, length and head circumference

4.2.2.5 INVESTIGATOR PERIODIC DATA COLLECTION

"During hospitalization, preterm subjects will have their weight recorded daily while they are receiving study formula. Length and head circumference will be recorded weekly, along with an additional weight measurement. For a given subject, the same scale should be used for the weekly weight measurement."

"Weight, length, and head circumference will also be recorded at the 40, 48, and 57 week post conceptual age visit (preterm) and 56 and 119 days of age visit (term)."

4.2.2.6 BLOOD DRAW

When preterm infant enrolls in the study and again at termination of study formula (i.e., hospital discharge or 28 days after reaching 90 kcal/kg/d of study product), the Investigator will ascertain that the infant is essentially solely formula fed. If this criteria is met, 1.2 ml/blood will be drawn for blood lipids. The sample will be processed as described in Appendix B.

An attempt will also be made to draw a similar blood sample at the 48 weeks PCA visit when visual acuity is measured in both term and preterm infants.

4.2.2.7 VISUAL ACUITY BY FORCED CHOICE PREFERENTIAL LOOKING (FPL) AT 48 AND 57 WEEKS ± 4 DAYS POST-CONCEPTUAL AGE

When the infant is 48 and 57 weeks \pm 4 days post-conceptual age, trained persons at each study site will follow the Teller Acuity Card Procedure for the measurement of visual acuity of all study subjects. It is essential that only persons who are trained in the FPL procedure for determining visual acuity do the testing. If necessary, training of responsible persons and documentation of completion of successful training will be done at Children's Hospital Medical Center Ophthalmology Department in Seattle, Washington, according to the procedure attached as Appendix C.

If the infant cannot complete the procedure at 48 or 57 weeks \pm 4 days postconceptual age (i.e., too fussy, too sleepy, too inattentive) the test should be repeated within 7 days.

4.2.2.8 INTERIM EVALUATION

At preterm infant hospital discharge or 28 days after reaching 90 kcal/kg/d of study formula feeding, whichever is longer, the investigator will fill out an "Interim Evaluation" form. After reviewing the subject's records and discussion with the parents and staff, the investigator will indicate whether:

- . Whether or not the subject completed at least 28 days of study formula intake ≥90 kcal/kg/d and both blood samples obtained
- If the study was not completed, and reason
- Whether or not the subject received steroids (glucorticoids)
- . Investigator's evaluation of the study formula

The first and last dates study material was taken will be recorded.

4.2.2.9 FINAL EVALUATION

At the final study visit (57 weeks postconceptual age) or earlier if the subject drops out, the Investigator will fill out a "Final Evaluation" Case Report Form. After reviewing the subject's records and discussion with the parents, the Investigator will indicate whether the subject:

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- (1) Completed feeding regiment and all study parameters (i.e., anthropometrics and visual acuity measured).
- (2) Did not complete feeding regimen.
- (3) Not completed and reason.

4.3 CLINICAL OBSERVATIONS

4.3.1 PHYSICAL EXAMINATIONS

Subjects will have weight, length and head circumferences recorded at birth, weekly while hospitalized, then at 40, 48, and 57 weeks \pm 4 days postconceptual age.

Body weight will be measured using an electronic balance or a double beam balance accurate to 10 g or ½ oz with non-detachable weights. During hospitalization, if more than one such balance is employed in the practice, either one balance should be designated the study balance and all study weights will be carried out on that balance for a particular subject, or the balances will be checked and certified to register the same weight throughout the range of weights expected. Outpatient weights will be obtained on a calibrated office scale.

Documentation indicating balance calibration of the outpatient balance carried out within 12 months of study initiation will be supplied to the Sponsor.

Length will be measured with the infant in recumbent position with the help of two examiners and a suitable measuring apparatus. One person holds the subject's head in contact with a fixed vertical headboard and a second person holds the subject's feet, toes pointing directly upward and, also applying gentle traction. The baby is measured from the headboard to the soles of the feet with a non-stretching tape measure.

Head circumference will be measured, employing a flexible, nonstretchable cloth or vinyl tape.

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4.3.2 VISUAL ACUITY BY FORCED CHOICE PREFERENTIAL LOOKING (FPL)

Visual acuity will be determined at 48 and 57 weeks \pm 4 days postconceptual age according to procedures outlined in Appendix C.

4.3.3 LABORATORY TESTS

Blood will be drawn from preterm infants by heel prick or venipuncture when study formula is begun and terminated. An attempt will be made to draw blood at 48 weeks \pm 4 days PCA from both term and preterm infants. Procedures for handling the blood are described in Appendix B.

FLOW CHART

4.4

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Viait 3 57 wks ± 4d PCA (when the subject discontinues or completes) > > > > Visit 2 48 wks ± 4d PCA · .:; TERM Physical > > > > > > Visit 1 40 wks ± 4d PCA > > > Visit 3 57 wks ± 4d PCA > > > Visit 2 46 wks ± 4d PCA > > > > > > (when the subject discontinues or completes) Visit 1 40 wks ± 4d PCA PRETERM > > > > > Physical Termination of Study Formula † > > > > > intake >50 kcal/kg/d Enteral \$ * * > > BIrth > > > Randomization Study Formula Circumference Enfamil w/iron **EVENT** Visual Acuity Assessment Human Milk Assessment **Blood Draw** Illnesses Length Weight Interim Head Final Test

Medical problems related to or affecting formula consumption will be recorded when they occur. Recorded daily and weekly during hospitalization.
At hospital discharge or 28 days of study formula intake (after reacting 90 kcal/kg/d), whichever is later.

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5. CRITERIA FOR RESPONSE

Criteria for response will depend upon the following:

- Visual Acuity better than the control formula.
- Visual Acuity comparable to breastfed term infant.
 - Red Blood Cell phosphatidyl ethanolamine DHA and ARA weight % greater than formula control group.
 - Growth as measured by weight achieved at 48 and 57 weeks postconceptual age comparable to formula control group.

6. STATISTICS

6.1 RANDOMIZATION

If the subject meets the inclusion and exclusion criteria, randomization to one of three formula groups will take place. The randomization schedule will be provided by Mead Johnson Research Center. A separate randomization schedule will be provided for males and females.

6.2 SAMPLE SIZE

The primary parameter of interest is visual acuity as measured by the Forced Choice Preferential Looking (FPL). The minimal clinically relevant difference was determined to be 0.5 octave. A consultant in the field of visual acuity estimated the standard deviation to be 0.5 octave. This value was increased to .7 octave in case more variability was experienced in this study. Thirty-two subjects per group are needed to attain 80% power when testing at an alpha level of 0.05.

A sample size estimate of 50 per group was determined to achieve $\alpha + 0.05$, $\beta + 0.20$, for weight of infants receiving study oil being greater than 400 gm below control at 48 weeks postconceptual age or 500 g below control at 57 weeks postconceptual age with a standard deviation of 800 g. It was therefore determined that 50 subjects per group will be used in the study.

6.3 ANALYTICAL PLAN

Visual acuity data will be recorded in cycles per cm. These values will be converted to cycles per degree using the following formula:

 $cycles/degree = 38 \times cycles/cm$

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A log transformation will be applied to the data prior to analysis. Analysis of variance techniques will be used to assess feeding regimen group differences in visual acuity. If the overall F test for feeding regimen is significant at al alpha level of 0.05, pairwise comparisons will be made at an alpha level of 0.05. If no significant differences are detected, then a post-study power analysis will be performed to demonstrate that the study had adequate power to detect the minimal clinically relevant difference.

Analysis of variance will be used to assess feeding regimen differences in phosphatidyl choline DHA and ARA levels and in phosphatidyl ethanolamine DHA and ARA levels at each time point. If the overall F test is significant at al alpha level of 0.05, then pairwise comparisons will be made at an alpha level of 0.05.

Analysis of variance will be used to assess feeding regiment differences in weight at 48 and 57 weeks postconceptual age. The statistical model will include terms for feeding regimen, study center, sex and all two-way interactions. Non-significant interactions will be removed from the final statistical model. Two one-sided tests will be performed comparing each experimental formula (EC) with the control formula (CF). The hypothesis to be tested is as follows:

 $H_0 = \text{Weight (CF)} \leq \text{Weight (EF)}.$

The alternative hypothesis is as follows:

 $H_1 = Weight (CF) > Weight (EF).$

If H_0 if rejected and the mean weight of the control formula exceeds that of the experimental formula by more than 400 mg at 48 weeks postconceptual age or by 500 g at 57 weeks postconceptual age then the conclusion is that the experimental formula does not exceed that of the experimental formula by more than 400 g at 48 weeks postconceptual age

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or by 500 mg at 57 weeks postconceptual age then the conclusion is that the experimental formula does provide adequate growth. If H_0 is not rejected then a post-study power analysis will be performed to demonstrate that eh study had adequate power to detect the above mentioned clinically relevant differences. If adequate power is achieved then the conclusion is that the experimental formula does provide adequate growth.

Fisher's exact test will be used to compare the proportion of subjects in each group with illness/symptoms of concern during the study. The analysis will be performed for each type of illness/symptom reported, with classification of investigator terms into similar terminology made as necessary.

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APPENDIX A NUTRIENT COMPOSITION OF FORMULAS

All study formulas are 24 kcal/fl oz and are identical in composition to marketed Enfamil Premature Formula except for the study oils employed. These oils are described in the protocol.

NUTRIENT	STUDY FORMULAS	ENFAMIL WITH Fe
Protein, g	3.	2.2
Fat, g	5.1	5.6
Carbohydrate, g	11.1	10.3
Vitamin A IU	1250	310
Vitamin D IU	270	63
Vitamin E IU	6.3	2
Vitamin K mcg	8	8
Thiamine, mcg	200	78
Riboflavin, mcg	300	150
Vitamin B ₄ , mcg	150	63
Vitamin B ₁₂ , mcg	0.25	0.23
Niacin, mcg	4000	1250
Folic Acid, mcg	35	15.6
Pantothenate, mcg	1200	470
Biotin, mcg	4	2.3
Vitamin C, mg	20	8.1
Choline, mg	12	15.6
Inositol, mg	17	4.7
Calcium, mg	165	78
Phosphorus, mg	83	53
Magnesium, mg	6.3	7.8
Iron, mg	1.8	0.5
Zinc, mg	1.5	0.78
Manganese, mcg	6.3	15.6
Copper, mcg	125	. 94
Iodine, mcg	25	6
Sodium mg (mEq)	39 (1.7)	27(1.17)
Potassium mg (Meq)	103 (2.6)	108 (2.8)
Chloride mg (Meq)	85 (2.4)	63 (1.77)

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FINAL STUDY REPORT

Study Design: This double-blind, parallel-group study (project 3338) was carried out in 16 neonatal centers (study numbers 9698-9709, 9712, 9723, 9743, and 9746) in North America. Three premature infant feedings were compared. Each had the same composition except for the incorporation of fungal and/or micro algal oils up to about 3% of the fat blend to provide the experimental levels of docosahexaenoic acid (DHA) and arachidonic acid (ARA). The control formula (C, Enfamil® Premature Formula) contained no DHA or ARA, the DHA formula (D) contained about 0.15% of energy as DHA (0.34% of fat), and the DHA+ARA formula (DA) contained about 0.14% of energy as DHA (0.33% of fat) and 0.27% of energy as ARA (0.60% of fat). The formulas were fed to 284 randomized infants weighing 846 to 1560 grams at birth for at least 28 days. Upon completion of study formula intake, they were given routine infant formula and followed through 4 months gestationally corrected age. A group of 90 exclusively human milk fed term infants were enrolled and followed to 4 months of age as a reference group (H).

Study Objective and Statistical Analysis: The primary objective of this study was to establish the safety of feeding D or DA to preterm infants during their initial hospitalization as measured 1) by growth, acceptance and tolerance while consuming the formula for at least 1 month and 2) by close monitoring and observation for a 4 to 5 month follow-up period (4-5 times the treatment period) while consuming unsupplemented routine term infant formula. The primary growth parameter selected was weight with evaluation of the proposition that weight on test formula was greater than or equal to weight on control formula. The one sided statistical test for an adverse effect on growth maximized the power to detect a difference should one be present. A two-sided test was used for all other parameters. A p-value of less than 0.05 was used to establish significance.

Secondary objectives of the study were 1) to evaluate the impact of fatty acid levels in erythrocyte phospholipids at the end of study feeding and 2) to determine if any effect on mean visual acuity greater than half an octave could be demonstrated at 2 and 4 months corrected age.

Results: Six infants were just outside the weight parameters and five infants just older than the less than 24 days chronological age parameter for enrollment in the study. In each case, judgement by the clinical or medical monitor was made to include them in the study prior to enrollment based on their homogeneity with other study infants in all other particulars, e.g., state of health, type of medical complications, and weight for gestational age. All these infants were included in the analysis of the study results.

The formula groups were comparable at enrollment (See table 1). Post-conceptual age, weight, length, and head circumference at enrollment did not differ among the groups.

All groups experienced comparable final study status (See table 2). Drop outs did not differ among the formula fed groups during hospitalization. There also were no differences in drop outs among the four groups at study completion.

Both formulas D and DA provide adequate growth when compared to formula C (See table 3, figure 1, and Appendix 1). Weight gain during hospitalization was no less on D or DA than on C, 33.3, 34.7, and 30.7 g/day, respectively. Furthermore, no less weight was achieved on D or DA than on C at 40, 48, and 57 weeks post-conceptual age (See table 4, figure 2, and Appendix 1); statistical power was greater than 0.89 to detect a clinically relevant decrease.

Post-hoc analysis reveals that infants on DA grew faster than infants receiving C and D (See table 5 and figure 1). This enhanced growth provided faster "premature infant catch-up" compared to C and D. Weight achieved by the DA group (3198 g) was higher than C (3075 g) and D (3051 g) at 40 weeks post-conceptual age but had not fully caught up to the term birth weight (3438 g) of group H (See table 4 and figure2). This catch up trend continued through 48 to 57 weeks by which time the mean weight of group DA did not differ from group H while groups C and D remained significantly lower.

Length was not different among the formula groups either during hospitalization or the follow-up period, although the ordered sequence of mean lengths was the same as for the weights (See table 7 and figure 3). This is likely at least partially due to length being a less sensitive parameter of growth than weight. For the same reason, the mean lengths of group H infants were higher than that of all the premature infant groups at 40, 48 and 57 weeks post-conceptual age indicating slower catch up in this parameter.

Head circumference is the least sensitive parameter of growth and was not different among any of the four groups at any time measured except at 40 weeks postconceptual age (See table 8 and figure 4). At this time, as expected, the birth head circumference of group H was smaller than the formula fed premature infants possibly due to molding of labor and to insufficient time for adjustment to the extrauterine environment.

Visual acuity has reportedly been enhanced in studies where DHA supplemented formulas were fed to premature infants both in the hospital and continuing after discharge. In this study, visual acuity was measured about 3 months and then about 5 months after stopping study formula to determine whether a residual beneficial effect of at least half an octave might be observed. Although no difference in visual acuity was found among the formula groups at these times (See table 8 and figure 5), the acuity card method used, the length of study formula feeding, and/or the length of time not on study formula at the time of measurement may have precluded its detection. However, at 57 weeks post-conceptual age, the breast fed term infant group did have statistically higher visual acuity scores than the test formula groups. But even these differences were at most only 0.33 octave and were clinically insignificant (See figure 6). It is important to note that the breast fed infants continued to receive DHA and ARA during the 3-5 month follow-up period while the formula fed groups did not. Thus, this minor difference in performance was not unexpected based on previous study findings and on developmental differences between term and preterm infants even at the same gestational age.

Individual fatty acid levels were determined in the phosphatidylcholine and phosphatidylethanolamine fractions of red blood cells before formula feeding, at the conclusion of test formula feeding, and at 48 weeks post-conceptual age (See tables 9 and 10). The premature infant groups were comparable at the beginning of test formula feeding. At the conclusion of test

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formula feeding, individual fatty acid levels varied among the groups. DHA and ARA were statistically significantly higher in the respectively supplemented groups. Other fatty acid levels reflected the impact of the supplementation. No clinically significant alterations in fatty acid levels or metabolism were identified. After discontinuing study formula and consuming a diet without DHA or ARA for about 3 months, no differences in fatty acid levels among formula fed groups were detectable, except for phosphatidylethanolmine levels of 18:2 (range 8.9-9.3%) and DHA (range 3.2-4.1%) which differences were not identified as being clinically significant. However, the breast fed group shows statistically significant differences in 13 fatty acid levels compared to the formula fed infants. These differences are undoubtedly due to the differences in fatty acid composition of human milk and the term formulas including the lack of DHA and ARA in the

Preterm infant complications were similar in all groups (See table 11). Over 80% of all infants were ophthamologically examined and over 90% had ultrasound evaluation of their heads. Specifically, the incidence and severity of retinopathy of prematurity (ROP or retrolental fibroplasia/RLF) and the incidence of intraventricular hemorrhage or its complications did not differ among formula groups. No feeding group related complications were identified.

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Serious adverse experiences did not differ (p=0.93) among the formula groups and were in the range of those expected in a premature infant population while on study formula: 6% in group C, 5% in group D, and 6% in group DA (See table 12). After the experimental formula phase, serious adverse experiences still did not differ among the preterm groups (See table 13): 13% in group C, 15% in group D, and 15% in group DA. However, the term infant breast fed group had significantly fewer serious adverse experiences (1%, p=0.002) as expected. Two infants reportedly suffered sudden infant death syndrome (SIDS), one in group C and one in group D; there was no significant difference in this complication among all four groups.

Conclusions: We conclude that feeding 0.13% of calories as DHA from micro algal oil and feeding 0.13 % of calories as DHA from micro algal oil plus 0.26% of calories as ARA from fungal oil in the matrix of premature infant formula to premature infants during the period of their initial hospitalization prior to 40 weeks post conceptual age is safe. These micro algal and fungal oil supplements do not result in any adverse effect on growth, clinical complications, or untoward events. Furthermore, this study reveals that growth benefits accrue to premature infants fed Enfamil Premature Formula supplemented with DHA and ARA from these sources compared to unsupplemented formula or formula supplemented with only DHA. No measurable benefit on visual acuity was identified when infants were tested at about 3 and 5 months after the supplemented formula was discontinued (2 and 4 months corrected age). However, providing human milk levels of intake of long chain polyunsaturated acids are warranted because they are critical to brain development and foster enhanced catch-up growth during this early development period.

Table I
Birth Statistics of Premature Subjects

	n	Mean (std)	Range	p-value
Post-Conceptual Age (Weeks) Control DHA DHA+ARA	62 66 66	29.5 (1.7) 30.0 (1.4) 29.7 (1.7)	25 - 33 26 - 32 26 - 34	0.076
Birth Weight (g) Control DHA DHA+ARA	62 66 66	1233.1 (176.6) 1272.8 (168.1) 1278.9 (177.6)	846 - 1560 900 - 1545 910 - 1535	0.25
Birth Length (cm) Control DHA DHA+ARA	60 66 66	38.4 (2.3) 38.6 (2.2) 38.7 (2.3)	34 - 43.75 33 - 43.5 33 - 44	0.62
Birth Head Circumference (cm) Control DHA DHA+ARA	61 64 65	26.9 (1.5) 27.3 (2.1) 27.2 (1.6)	23.5 - 30.5 22 - 37 23.5 - 30	0.53

Table 2 Summary of Final Study Status

		Reg	inen.		p-value
	Control	DHA	DHA+ARA	HM	
Immediate dropout, study formula never consumed		2	2		
Study Formula Phase * Completed Discontinued	52 (84%) 10 (16%)	59 (89%) 7 (11%)	62 (94%) 4 (6%)		0.20
Reason discontinued >96 cumulative hours NPO <28 days of intake >= 90 kcal/kg/day Complications unrelated to study formula NEC or other GI disease Formula intolerance Parents request Not off oxygen prior to discharge Protocol violation	3 3 1 2	1 2	1 1 1		
Term Formula Phase ** Completed Discontinued	45 (87%) 7 (13%)	47 (80%) 12 (20%)	53 (85%) 9 (15%)	77 (86%) 13 (14%)	0.74

^{*}The CRFs for 9709-003 (DHA) and 9743-304 (DHA) were marked discontinued because the subjects met the study formula intake criteria for only 27 days. These subjects are counted completed here because subjects at other sites with similar intakes were marked completed.

^{**}Based on subjects who completed the Study Formula phase. During the Term Formula phase, subjects were fed marketed formula.

Switching to a different marketed formula did not result in termination from the Term Formula phase.

Gender-by-Regimen p-value

0.87

Table 3

Weight Growth Rate During Study Formula Phase

Gender p-value	0.17
Study p-value	0.00
Comparison p-value*	0.967
Comparison	Control vs DHA Control vs DHA+ARA
Standard Error	
Least Square Mean	30.7
c	8 8 8 8 8 8
Regimen	Control DHA DHA+ARA

* One-sided test of the null hypothesis: Test Kean >= Control Mean

Table 4 Weight at 40, 48, and 57 Weeks Post-Conceptual Age

Veeks Conceptual Age	Regimen	c	Least Square Kean	Standard Error	Comparíson	Comparison p∙value*	Study p-value	Gender p-value	Gender-by-Regimen p-value
0	Control DHA DHA+ARA HM	22.22	3075.3 3051.4 3198.2 3437.7	67.9 66.8 62.9 60.6	Control vs DHA Control vs DHA+ARA HN vs DHA HN vs DHA+ARA HN vs Control	0.388 0.931 0.000 0.001	0.59	0.45	1 .00
87	Control DHA DHA+ARA HM	53 51 81	4711.0 4663.8 5039.1 5181.5	94.6 97.3 93.0 85.9	Control vs DHA Control vs DHA+ARA HM vs DHA HM vs DHA+ARA HM vs Control	0.360 0.995 0.000 0.114 0.000	0.58	0.13	0.29
25	Control DHA DHA+ARA HM	45 46 78 78	6045.4 5987.2 6312.9 6405.0	139.5 137.6 127.9 126.7	Control vs DHA Control vs DHA+ARA HM vs DHA HN vs DHA+ARA HN vs Control	0.371 0.940 0.005 0.278 0.014	0.58	0.29	0.33

* One-sided test of the null hypothesis: Test Nean >= Control Nean

Table 5
Post-hoc Analysis of Weight

Time	Comparison	Two-sided p-value
Weight Gain During Study Formula Phase	C vs. DHA C vs. DHA+ARA DHA vs. DHA+ARA	0.067 0.004 0.30
Weight at 40 Weeks pca	C vs. DHA C vs. DHA+ARA DHA vs. DHA+ARA HM vs. DHA HM vs. DHA+ARA HM vs. C	0.78 0.14 0.074 <0.001 0.002 <0.001
Weight at 48 Weeks pca	C vs. DHA C vs. DHA+ARA DHA vs. DHA+ARA HM vs. DHA HM vs. DHA+ARA HM vs. C	0.72 0.011 0.004 <0.001 0.23 <0.001
Weight at 57 Weeks pca	C vs. DHA C vs. DHA+ARA DHA vs. DHA+ARA HM vs. DHA HM vs. DHA+ARA HM vs. C	0.74 0.12 0.057 0.010 0.56 0.028

Length at 40, 48, and 57 Weeks Post-Conceptual Age

Gender-by-Regimen p-value	0.63	0.52	0.84
Gender p-value	0.88	0.14	0.02
Study p-value	0.03	0.00	0.00
Pairwise p-value	0.242 0.233 0.000 0.000 0.000	0.824 0.079 0.000 0.000 0.000	0.615 0.236 0.000 0.000 0.000
Pairwise Comparison	CONTROL VS DHA CONTROL VS DHA+ARA HH VS DHA HH VS DHA+ARA CONTROL VS HH DHA VS DHA+ARA	Control vs DHA Control vs DIIA+ARA HN vs DHA IIM vs DIIA+ARA Control vs HM	Control vs DHA+ARA Control vs DHA+ARA IIM vs DHA HH vs DHA+ARA Control vs HM DHA vs DHA+ARA
Regimen p-value	0.000	0.000	0.000
Standard Error	7777	m.m.o.o.	0.4 0.4 0.3 0.3
Least Square Nean	48.4 47.8 50.6 50.6	54.7 54.6 57.4	60.7 60.5 61.3 62.4
c	85 88 83 88	53 57 81	47 54 76
Regimen	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM
Weeks Post-Conceptual Age	07	48	. 25

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	Gender-by-Regimen p-value	0.38	1.00	0.85
	Gender p-value	0.00	0.00	0.00
	Study p-value	0.91	0.81	99.0
eptual Age	Pairwise p-value	0.931 0.900 0.000 0.000 0.000 0.829		
Head Circumference at 40, 48, and 57 Weeks Post-Conceptual Age	Pairwise Comparison	Control vs DHA Control vs DHA+ARA HM vs DHA HM vs DHA+ARA Control vs HM DHA vs DHA+ARA		
at 40, 48,	Regimen p-value	0.000	0.983	0.689
cumference	Standard Error	00.00	0.2 0.2 0.1	0.2
Head Cir	Least Square Mean	3355	39.1 39.0 39.0	41.9 41.5 41.7
	c	51 58 85	52 54 56 81	42 49 78
	Caeioag	Control DHA DHA+ARA HM	Control DHA DHA+ARA HH	Control DHA DHA+ARA IIN
	Weeks Post-Conceptual	9 0 7 K	87	52

Table 8

Visual Acuity at 48 and 57 Weeks Post-Conceptual Age

Study p-value		0.000
Pairwise p-value		0.697 0.071 0.042 0.000 0.113
Pairwise Comparison		Control vs DHA Control vs DHA+ARA HW vs DHA HM vs DHM+ARA Control vs HM
Regimen p-value	0.950	0.004
<u> </u>	0.10 0.10 0.09	0.08 0.08 0.07 0.07
Least Square Nean (tog base2 cycles/deg)	0.78 0.85 0.78 0.81	1.79 1.75 1.61 1.94
Geometric mean (cycles/deg)	1.72 1.80 1.72 1.75	3.47 3.37 3.06 3.85
c	51 57 81	46 47 77
Regimen	Control DIIA DIIA+ARA IIN	Control DHA DHA+ARA
Weeks Post-Conceptual Age	87	

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	Pairwise p-value									0.196 0.010 0.176
	Pairwise Comparison									Control vs DHA Control vs DHA+ARA DHA vs DHA+ARA
	Regimen p-value	0.762	0.559	0.165	0.884	0.441	0.243	0.679	0.830	0.034
Fatty Acids	Median	0.036 0.030 0.031	0.599 0.686 0.656	0.021 0.016 0.018	36.594 35.578 35.987	0.845 0.976 0.931	11.468 11.201 11.174	17.308 16.935 16.988	18.952 19.603 18.824	0.116 0.130 0.134
idytchotine	Standard Error	0.019	0.036 0.031 0.031	0.009	0.540	0.049	0.243 0.238 0.192	0.298 0.391 0.271	0.525 0.505 0.466	0.008
Red Blood Cell Phosphatidylcholine Fatty Acids	Arithmetic Nean	0.081 0.066 0.057	0.623 0.663 0.661	0.045 0.026 0.035	36.706 36.363 36.877	0.940 0.981 1.094	11.660 11.402 11.016	17.053 17.219 17.256	18.614 18.631 18.573	0.120 0.136 0.150
B1 00d	ح	52 58 61	52 58 61	52 58 61	52 58 61	52 58 61	52 58 61	52 58 61	52 58 61	52 58 61
Red	Regimen	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA
	Fatty Acid	12:0	14:0	14:1	16:0	16:1	18:0	18:1	18:2	18:376
	Time	Study Form Initiation	Study Form Initlation	Study Form Initiation	Study Form Initiation	Study Form Initiation	Study Form Initiation	Study Form Initiation	Study Form Initiation	Study form Initiation

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		Red	Blood	Red Blood Cell Phosphatidylcholine Fatty Acids	idylchol ine	Fatty Acids			
Time	Fatty Acid	Regimen	د	Arithmetic Mean	Standard Error	Median	Regimen p-value	Paíruise Comparison	Pairwise p-value
Study Form Initiation	20:0	Control DHA DHA+ARA	52 58 61	0.399 0.337 0.310	0.050 0.035 0.037	0.224 0.236 0.188	0.647		
Study Form Initiation	18:313	Control DHA DHA+ARA	52 58 61	0.315 0.257 0.233	0.033 0.014 0.010	0.246 0.246 0.216	0.234		
Study form Initiation	20:1	Control DHA DHA+ARA	52 58 61	0.287 0.287 0.268	0.020 0.015 0.011	0.262 0.281 0.269	0.723		
Study Form Initiation	18:4	Control DHA DHA+ARA	52 58 61	0.017 0.025 0.017	0.003	0.000	0.290		
Study Form Initiation	20:2n6	Control DHA DHA+ARA	52 58 61	0.632 0.628 0.602	0.025 0.025 0.021	0.632 0.640 0.614	0.673		
Study form Initiation	20:3n6	Control DHA DHA+ARA	52 58 61	2.144 2.208 2.218	0.098 0.080 0.074	2.096 2.296 2.135	0.507		
Study Form Initiation	20:4n6	Control DHA DHA+ARA	52 58 61	7.657 8.164 8.090	0.262 0.347 0.310	8.124 7.876 8.207	0.819		
Study Form Initiation	22:1	Control DHA DHA+ARA	52 58 61	0.106 0.127 0.126	0.010 0.010 0.010	0.105 0.130 0.139	0.155		
Study Form Initiation	20:5n3	Control DHA DHA+ARA	52 58 61	0.351 0.322 0.321	0.057 0.015 0.015	0.298 0.302 0.329	0.911		

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Red Blood Cell Phosphatidylcholine Fatty Acids

Pairwise p-value						
Pairwise Comparison						
Regimen p-value	0.331	0.665	0.923	0.199	0.885	0.858
Median	0.423 0.481 0.425	0.075 0.084 0.096	0.232 0.239 0.256	0.000	0.203 0.195 0.193	1.000 1.034 0.970
Standard Error	0.144 0.030 0.021	0.054 0.019 0.056	0.020 0.017 0.018	0.000	0.019 0.013 0.010	0.051 0.053 0.050
Arithmetic Mean	0.578 0.493 0.443	0.208 0.115 0.180	0.266 0.259 0.265	0.000	0.213 0.215 0.203	0.984 1.075 1.006
c	52 58 61	52 58 61	52 58 61	52 58 61	52 58 61	52 58 61
Regimen	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA
Fatty	22:4n6	24:1	22:5n6	22:4n3	22:5n3	22:6n 3
Time	Study Form Initiation					

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	Pairwise p-value					0.118 0.003 0.152			0.600 0.005 0.001	
	Pairwise Comparison					Control vs DHA Control vs DHA+ARA DHA vs DHA+ARA			Control vs DHA Control vs DHA+ARA DHA vs DHA+ARA	
	Regimen p-value	0.843	0.834	0.155	0.767	0.013	0.886	0.686	0.001	0.527
atty Acids	Median	0.035 0.031 0.032	0.806 0.783 0.758	0.033 0.015 0.018	34.798 34.841 33.890	0.526 0.475 0.472	14.197 13.867 14.108	14.291 13.998 14.218	21.506 22.517 20.662	0.074 0.076 0.066
dylcholine F	Standard	0.026 0.042 0.012	0.039 0.035 0.036	0.008 0.009 0.007	0.512 0.595 0.584	0.026 0.042 0.029	0.261	0.277 0.272 0.380	0.340 0.457 0.337	0.006 0.009 0.013
Red Blood Cell Phospharidylcholine Fatty Acids	Arithmetic Mean	0.100 0.111 0.064	0.808 0.781 0.755	0.047 0.036 0.036	35.837 35.560 35.069	0.566 0.594 0.526	13.972 14.065 14.341	14.456 14.116 14.344	21.673 22.045 19.899	0.080 0.088 0.087
Blood C	c	56 59 59	53 59	56 53	53 56 59	25 53	50	53 59 59	55 65	53 56 59
Red	Regimen	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DNA DNA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA
	Fatty Acid	12:0	14:0	14:1	16:0	16:1	18:0	18:1	18:2	18:3n6
	T ine	Study form Termination	Study Form Termination	Study Form Termination	Study Form Termination	Study Form Termination	Study Form Termination	Study Form Termination	Study Form Termination	Study Form Termination

Table 9

	Pairwise p-value		0.503 0.068 0.011					0.097		0.004 0.108 0.000
	Pairwise Comparison		Control vs DHA Control vs DHA+ARA DHA vs DHA+ARA					Control vs DHA Control vs DHA+ARA DHA vs DHA+ARA		Control vs DHA Control vs DHA+ARA DHA vs DHA+ARA
•	Regimen p-value	0.424	0.031	0.149	0.672	0.051	0.208	0.000	976.0	0.000
Fatty Acid	Median	0.392 0.281 0.251	0.283 0.285 0.256	0.302 0.283 0.283	0.015 0.018 0.008	0.910 0.873 0.821	2.091 2.043 1.904	6.029 5.892 8.891	0.125 0.114 0.104	0.189 0.233 0.169
idylcholine	Standard Error	0.050 0.053 0.049	0.020 0.030 0.009	0.014 0.013 0.013	0.004	0.026 0.023 0.022	0.073	0.240 0.220 0.255	0.010 0.009 0.011	0.022 0.012 0.014
Red Blood Cell Phosphatidylcholine Fatty Acids	Arithmetic Mean	0.504 0.472 0.430	0.321 0.335 0.273	0.318 0.300 0.307	0.022 0.022 0.014	0.893 0.880 0.824	2.032 2.017 1.908	6.046 5.774 8.465	0.117 0.110 0.115	0.214 0.246 0.186
Blood	c	58 59 59	53 59 59	55 53 59 54	59 63	55 53	53 59	53 56 59	55 53	53 56 59
%ed	Regimen	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DIIA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA
	Fatty	20:0	18:3n3	20:1	18:4	20:2n6	20:3n6	20:4n6	22:1	20:5n3
	Time	Study Form Termination	Study form Termination	Study Form Termination	Study Form Termination	Study Form Termination	Study Form Termination	Study Form Termination	Study Form Termination	Study Form Termination

Table 9

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	Pairwise Comparison			Control vs DHA Control vs DHA+ARA DHA vs DHA+ARA			Control vs DHA Control vs DHA+ARA DHA vs DHA+ARA	
	Regimen p-value	0.093	0.303	0.006	0.359	0.221	000.0	
fatty Acids	Hedian	0.390 0.426 0.487	0.062 0.086 0.089	0.163 0.133 0.165	0.000	0.289 0.260 0.255	0.812 1.352 1.259	
dylcholine i	Standard Error	0.048 0.061 0.027	0.039 0.036 0.040	0.013 0.011 0.009	0.001	0.019 0.026 0.013	0.072 0.063 0.049	
Red Blood Cell Phosphatidylcholine fatty Acids	Arithmetic Nean	0.484 0.489 0.496	0.127 0.143 0.177	0.181 0.145 0.172	0.001	0.306 0.293 0.265	0.895 1.380 1.244	
Blood C	c	53 59	28 23	2883	53 56 59	53 59	25 53	
Red	Regimen	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	
	Fatty Acid	22:4n6	24:1	22:5n6	22:4n3	22:5เ3	22:6n3	
	Time	Study Form Termination	Study Form Termination	Study Form Termination	Study Form Termination	Study Form Termination	Study Form Termination	

		Pairwise p-value					0.527 0.593 0.000 0.000 0.900	0.524 0.467 0.000 0.006 0.0006
		Pairwise Comparison				·	Control vs DHA Control vs DHA+ARA HH vs DHA+ARA Control vs HM DHA vs DHA+ARA	Control vs DHA Control vs DHA+ARA HM vs DHA+ARA IM vs DHA+ARA Control vs HM DHA vs DHA+ARA
	Acids	Regimen p-value	0.729		0.943	0.448	.000.0	0.000
	ine Fatty	Hedian	0.026	0.020	0.331 0.324 0.328 0.335	0.013 0.011 0.015 0.020	34.473 34.473 34.165 32.228	0.338 0.352 0.368 0.473
Table 9	phat i dyl chol	Standard Error	0.005	0.004	0.039 0.032 0.024 0.026	0.006 0.007 0.006 0.003	0.577 0.689 0.506 0.506	0.043 0.023 0.024 0.020
	Red Blood Cell Phosphatidylcholine Fatty Acids	Arithmetic Nean	0.032	0.026 0.059	0.402 0.353 0.353 0.381	0.025 0.026 0.026 0.024	34.627 35.272 34.802 33.037	0.435 0.380 0.395 0.507
	Red B	c	37	38	37 38 38 56	37 32 38 56	37 38 38 56	37 32 38 56
		Regimen	Control	DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM
		Fatty Acid	12:0		14:0	14:1	16:0	16:1
		Time	48 Weeks PCA		48 Veeks PCA	48 Weeks PCA	48 Weeks PCA	48 Weeks PCA

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Red Blood Cell Phosphatidylcholine Fatty Acids

Pairwise on p-value	Control vs DHA 0.760 Control vs DHA+ARA 0.889 HM vs DHA 0.000 HM vs DHA+ARA 0.000 Control vs HM 0.000 DHA vs DHA+ARA 0.661		Control vs DHA 0.840 Control vs DHA+ARA 0.527 HM vs DHA HM vs DHA+ARA 0.000 Control vs HM 0.000 DHA vs DHA+ARA 0.685	Control vs DHA 0.950 Control vs DHA+ARA 0.774 HM vs DHA 0.004 HH vs DHA+ARA 0.001 Control vs HM 0.003 DHA vs DHA+ARA 0.831	
n Pairwise e Comparison					10
Regimen p-value	0.00	0.256	0.000	0.002	0.785
Median	12.759 12.786 12.793 14.729	18.636 18.492 18.227 18.727	23.552 23.717 23.839 18.482	0.067 0.067 0.062 0.039	0.197
Standard	0.313 0.249 0.235 0.287	0.453 0.429 0.289 0.305	0.518 0.516 0.422 0.344	0.008 0.005 0.006 0.004	0.075
Arithmetic Kean	13.016 12.944 12.804 14.583	17.894 17.766 17.850 18.662	23.469 23.538 23.738 18.650	0.071 0.069 0.069 0.042	0.348
c	37 38 38 56	28 33 34 35 35 35 35 35 35 35 35 35 35 35 35 35	37 38 38 56	37 38 38 56	37
Regimen	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control
Fatty Acid	18:0	18:1	18:2	18:3n6	20:0
Time	48 Veeks PCA	48 Weeks PCA	48 Veeks PCA	48 Veeks PCA	48 Weeks PCA

		Pair⊬ise p∙value	0.812 0.918 0.001 0.002 0.001	0.579 0.588 0.001 0.000 0.974	0.822 0.161 0.039 0.001 0.054 0.262		0.610 0.735 0.000 0.000 0.000
		Pairuise Comparison	Control vs DHA Control vs DHA+ARA HM vs DHA HM vs DHA+ARA Control vs HM DHA vs DHA+ARA	Control vs DHA Control vs DHA+ARA HM vs DHA HM vs DHA+ARA Control vs HM DHA vs DHA+ARA	Control vs DHA Control vs DHA+ARA HM vs DHA IIM vs DHA+ARA Control vs HM DHA vs DHA+ARA		Control vs DHA Control vs DHA+ARA HM vs DHA+ARA HM vs DHA+ARA Control vs HM
	Acids	Regimen p-value	0.001	0.000	0.010	0.629	0.000
	ine Fatty /	Median	0.182 0.190 0.120	0.420 0.435 0.375 0.309	0.000 0.000 0.000 0.015	0.537 0.543 0.550 0.531	1.741 1.684 1.717 2.166
Table 9	shatidylchol	Standard Error	0.019 0.015 0.010 0.022	0.019 0.025 0.016 0.014	0.005 0.004 0.002 0.004	0.023 0.032 0.053 0.014	0.086 0.073 0.090 0.086
	Red Blood Cell Phosphatidylcholine Fatty Acids	Arithmetic Mean	0.222 0.211 0.203 0.182	0.418 0.406 0.382 0.311	0.018 0.016 0.007 0.024	0.543 0.557 0.636 0.560	1.709 1.702 1.844 2.265
	Red Blo	c	37 38 56	37 38 38 56	37 38 38 56	37 38 56	37 38 56
		Regimen	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM
		Fatty Acid	18:303	20:1	18:4	20:2n6	20:3n6
		Ţ	48 Weeks PCA	48 Veeks PCA	48 Weeks PCA	48 Veeks PCA	48 Weeks PCA

Table 9

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			Red B	Red Blood Cell Phosphatidylcholine fatty Acids	sphatidylcho	line fatty	Acids			
Time	Fatty Acid	Regimen	c	Arithmetic Mean	Standard Error	Median	Regimen p-value	Pairwise Comparison	Pairwise p-value	
48 Weeks PCA	20:4n6	Control DHA DHA+ARA HM	37 32 38 56	4.738 4.475 4.550 7.408	0.255 0.196 0.185 0.250	4.736 4.499 4.746 7.666	0.000	Control vs DHA Control vs DHA+ARA HM vs DHA HM vs DHA+ARA Control vs HM DHA vs DHA+ARA	0.508 0.805 0.000 0.000 0.000	
48 Weeks PCA	22:1	Control DHA DHA+ARA HM	37 32 38 56	0.166 0.116 0.131 0.160	0.036 0.014 0.024 0.030	0.131 0.118 0.105 0.104	0.664			
48 Vecks PCA	20:5า3	Control DHA DHA+ARA HM	37 38 38	0.102 0.084 0.099 0.138	0.015 0.006 0.009 0.009	0.077 0.083 0.078 0.123	0.000	Control vs DHA Control vs DHA+ARA HN vs DHA NN vs DHA+ARA Control vs HN DHA vs DHA+ARA	0.633 0.086 0.000 0.000 0.000	
48 Weeks PCA	22:416	Control DHA DHA+ARA HM	37 38 56	0.426 0.382 0.440 0.406	0.059 0.029 0.054 0.022	0.373 0.417 0.384 0.377	0.244			
48 Weeks PCA	24:1	Control DHA DHA+ARA HM	32 38 38	0.247 0.210 0.179 0.115	0.070 0.062 0.055 0.020	0.112 0.116 0.108 0.079	0.000	Control vs DHA Control vs DHA+ARA HM vs DHA+ARA Control vs HM Control vs HM DHA vs DHA+ARA	0.337 0.247 0.000 0.000 0.000 0.878	

		Pairwis p-value	0.505 0.647 0.000 0.001 0.270		0.598 0.759 0.000 0.000 0.000	0.111 0.052 0.000 0.000 0.000
		Pairwise Comparison	Control vs DHA Control vs DHA+ARA HM vs DHA HM vs DHA+ARA Control vs HM DHA vs DHA+ARA		Control vs DHA Control vs DHA+ARA HN vs DHA+ARA Control vs HM DHA vs OHA+ARA	Control vs DHA-ARA Control vs DHA+ARA HM vs DHA HM vs DHA+ARA Control vs HM DHA vs DHA+ARA
	Acids	Regimen p-value	0.000	1.000	0.000	000.0
	ine Fatty	Nedian	0.212 0.186 0.198 0.265	0.000 0.000 0.000	0.260 0.251 0.256 0.314	0.569 0.676 0.663 1.333
Table 9	sphatidylchol	Standard Error	0.016 0.012 0.022 0.016	0.000	0.029 0.017 0.026 0.018	0.047 0.048 0.043 0.081
	Red Blood Cell Phosphatidylcholine Fatty Acids	Arithmetic Nean	0.210 0.189 0.231 0.264	0.000	0.286 0.253 0.268 0.339	0.595 0.685 0.662 1.475
	Red Bl	c	37 32 38 56	37 32 38 56	32 33 32 32	37 38 56
		Regimen	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HN	Control DHA DHA+ARA HM
		Fatty	22:5n6	22:4n3	22:5n3	22:6n3
		e E	48 Neeks PCA	48 Weeks PCA	48 Veeks PCA	48 Weeks PCA

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		Red Bl	lood Cel	Red Blood Cell Phosphatidylethanolamine Fatty Acids	ylethanolamir	le fatty Ac	sp j		
Tine	Fatty Acid	Regimen	c	Arithmetic Mean	Standard Error	Median	Regimen p-value	Pairwise Comparison	Pairwise p-value
tudy Form Initiation	12:0	Control DHA DHA+ARA	52 57 61	0.069 0.075 0.063	0.015 0.013 0.010	0.022 0.033 0.039	0.546		
tudy form Initiation	14:0	Control DHA DHA+ARA	52 57 61	0.307 0.278 0.277	0.038 0.025 0.021	0.220 0.206 0.246	0.792		
tudy form Initiation	14:1	Control DHA DHA+ARA	52 57 61	0.080 0.061 0.062	0.015 0.012 0.009	0.032 0.028 0.050	0.181		
itudy form Initiation	16:0	Control DHA DHA+ARA	52 57 61	20.021 19.847 19.796	0.736 0.622 0.451	17.945 19.295 19.035	0.967		
Study Form Initiation	n 16:1	Control DHA DHA+ARA	52 57 61	0.731 0.769 0.836	0.035 0.034 0.035	0.698 0.746 0.837	0.337		
Study Form Initiation	n 18:0	Control DHA DHA+ARA	52 57 61	8.857 8.434 8.201	0.329 0.227 0.215	8.469 8.308 7.904	0.142		
Study Form Initiation	n 18:1	Control DHA DHA+ARA	52 57 61	16.450 16.208 16.415	0.301 0.326 0.375	16.698 16.308 16.001	0.412		
Study Form Initiation	in 18:2	Control DKA DHA+ARA	52 57 61	6.615 6.336 6.175	0.253	6.682 6.346 5.682	0.773		
Study Form Initiation	on 18:3n6	Control DHA DHA+ARA	52 57 61	0.165 0.190 0.192	0.018 0.019 0.016	0.145 0.152 0.169	0.040	Control vs DHA Control vs DHA+ARA DHA vs DHA+ARA	0.373 0.013 0.101

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			Red Blo	ood Cel	Red Blood Cell Phosphatidylethanolamine Fatty Acids	lethanolamin	ne Fatty Ac	ids		
Time		Fatty Acid	Regimen	c	Arithmetic Mean	Standard Error	Median	Regimen p-value	Pairwise Comparison	Pairwise p-value
Study form Initiation	iation	20:0	Control DHA DHA+ARA	52 57 61	0.372 0.314 0.259	0.043 0.030 0.024	0.291 0.244 0.186	0.151		
Study Form Initiation	tiation	18:3n3	Control DHA DHA+ARA	52 57 61	0.305 0.269 0.257	0.023 0.018 0.016	0.261 0.249 0.225	0.641		
Study Form Initiation	tiation	20:1	Control DHA DHA+ARA	52 57 61	0.573 0.615 0.571	0.036 0.034 0.027	0.517 0.555 0.544	0.395		
Study Form Initiation	tiation	18:4	Control DHA DHA+ARA	52 57 61	0.025 0.031 0.030	0.005 0.004 0.007	0.000 0.025 0.021	0.371		
Study Form Initiation	tiation	20:2n6	Control DHA DHA+ARA	52 57 61	0.479 0.463	0.023 0.024 0.028	0.480 0.437 0.427	0.706		
Study form Initiation	tiation	20:3n6	Control DHA DHA+ARA	52 57 61	1.843 1.965 1.973	0.072 0.077 0.064	1.829 1.820 1.911	660.0		
Study form initiation	tiation	20:4n6	Control DHA DHA+ARA	52 57 61	25.817 26.475 26.747	0.618 0.611 0.645	26.820 27.376 27.708	0.353		
Study form initiation	tiation	22:1	Control DHA DHA+ARA	52 57 61	0.150 0.167 0.168	0.017 0.015 0.017	0.138 0.151 0.141	0.572		
Study Form Initiation	itiation	20:5n3	Control DHA DHA+ARA	52 57 61	0.378 0.384 0.366	0.024	0.357 0.370 0.335	0.997		

Table 10

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52 7.290 0.182 57 7.431 0.186 61 7.456 0.167
52 0.100 57 0.059 61 0.072
52 1.757 57 1.809 61 1.851
52 0.001 57 0.001 61 0.005
52 1.496 57 1.375 61 1.380
52 6.119 57 6.444 61 6.407

Table 10

	Paírwise p-value						0.130 0.006 0.219		0.908 0.000 0.000	
	Paírwise Comparison						Control vs DHA Control vs DHA+ARA DHA vs DHA+ARA		Control vs DHA Control vs DHA+ARA DHA vs DHA+ARA	
:1ds	Regimen p-value	0.630	0.782	0.592	0.560	0.604	0.054	0.333	0.000	0.160
ne fatty Ac	Median	0.033 0.036 0.035	0.279 0.265 0.256	0.041 0.000 0.043	17.617 17.556 17.568	0.476 0.509 0.555	9.406 8.818 8.697	14.695 14.927 14.499	9.359 9.188 7.586	0.163 0.157 0.161
/ethanolami	Standard Error	0.018 0.019 0.012	0.031 0.039 0.030	0.020 0.013 0.011	0.673 0.614 0.467	0.034 0.045 0.049	0.266 0.208 0.242	0.437	0.192 0.207 0.141	0.012 0.017 0.018
Red Blood Cell Phosphatidylethanolamine Fatty Acids	Arithmetic Mean	0.093 0.093 0.067	0.360 0.380 0.348	0.086 0.066 0.066	19.326 19.062 18.357	0.511 0.579 0.618	9.614 9.173 8.961	14.763 15.177 14.814	9.405 9.180 7.756	0.169 0.187 0.198
lood Ce	c	58 58	58 58	55 55	53 55 58	55 58	55 58 58	53 58	53 58 58	53 58 58
Red B	Regimen	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA	Control DHA DHA+ARA
	Fatty Acid	12:0	14:0	14:1	16:0	16:1	18:0	18:1	18:2	18:3n6
	Time	Study Form Termination	Study form Termination	Study Form Termination	Study Form Termination	Study form Termination	Study Form Termination	Study form Termination	Study Form Termination	Study Form Termination

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		Red B	lood Ce	Red Blood Cell Phosphatidylethanolamine Fatty Acids	ylethanolami	ne Fatty Ac	ids		
Time	Fatty	Regimen	Ë	Arithmetic Nean	Standard Error	Median	Regimen p-value	Pairwise Comparison	Pairwise p-value
Study Form Termination	20:0	Control	23 23	0.404	0.044	0.278	0.146		
		DHA+ARA	282	0.288	0.029	0.208			
Study Form Termination	18:3n3	Control	23	0.382	0.017	0.364	0.134		
		DHA DHA+ARA	58 52	0.368	0.015	0.305			
Study Form Termination	20:1	Control	53	0.553	0.029	0.526	0.164		
		DIIA DHA+ARA	22 28 28	0.579	0.028	0.483			
Ctudy Form Termination	18:4	Control	53	0.042	0.010	0.018	0.108		
		DHA DHA+ARA	55 SS	0.026 0.022	0.005	0.019			
Study Form Termination	20:2n6	Control	S	0.754	0.029	0.765	0.068		
		DHA DHA+ARA	28.2	0.654	0.026	0.663			
Study Form Termination	20:3n6	Control	8	2.253	0.111	2.073	0.203		
		DHA DHA+ARA	5 85 5 85	2.066	0.073	1.992			
Study Form Termination	1 20:4n6	Control	53	24.279	0.527	25.132	000.0	Control vs DHA	0.119
		DHA DHA+ARA	% % %	23.464 26.760	0.520	27.372		DHA VS DHA+ARA	0.000
Study Form Termination	1 22:1	Control	53	0.149	0.019	0.122	0.229		
		DHA DHA+ARA	28	0.176	0.018	0.130			
Study Form Termination	n 20:5n3	Control	23	0.519	0.020	0.493	0.000	Control vs DHA Control vs DHA+ARA	0.286
		DHA DHA+ARA	55 V	0.411	0.015	0.415		DHA VS DHA+ARA	0.000

Table 10

		Red Bl	ood Ce	Red Blood Cell Phosphatidylethanolamine fatty Acids	dethanolamin	ne fatty Ac	sp ;		100
T ime	Fatty Acid	Regimen	c	Arithmetic Mean	Standard Error	Median	Regimen p-value	Pairwise Comparison	p-value
Study form Termination	22:4n6	Control DHA DHA+ARA	53.5 58	7.309 7.135 7.592	0.208 0.154 0.155	7.656 6.885 7.635	0.007	Control vs DHA Control vs DHA+ARA DIA vs DHA+ARA	0.025
Study Form Termination	24:1	Control DHA DHA+ARA	53 58	0.092 0.056 0.062	0.023 0.009 0.008	0.038 0.042 0.041	0.294		
Study Form Termination	22:5n6	Control DHA DHA+ARA	53 58	1.444	0.064	1,423	0.010	Control vs DHA Control vs DHA+ARA DHA vs DHA+ARA	0.003 0.255 0.050
Study Form Termination	22:4n3	Control DHA DHA+ARA	53 58 58	0.000	0.000	0.000	0.137		
Study Form Termination	22:5n3	Control DHA DHA+ARA	53 58 58	2.694 2.334 2.237	0.110	2.839 2.400 2.269	0.003	Control vs DHA Control vs DHA+ARA DHA vs DHA+ARA	0.004 0.002 0.943
Study Form Termination	22:6n3	Control DHA DHA+ARA	55 53	4.798 6.762 6.389	0.151 0.183 0.150	4.815 7.043 6.498	00000	Control vs DHA Control vs DHA+ARA DHA vs DHA+ARA	0.000 0.000 0.027

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	Pairwise p-value			ı		0.601 0.524 0.000 0.000 0.001
	Pairwise Comparison		·			Control vs DilA Control vs DilA+ARA HN vs DHA HN vs DHA+ARA Control vs HM DHA vs DHA+ARA
ty Acids	Regimen p-value	0.587	0.598	0.092	0.177	0.000
olamine Fat	Median	0.024 0.019 0.018 0.023	0.169 0.162 0.188 0.210	0.037 0.000 0.044 0.021	16.314 15.692 16.997 17.607	0.349 0.336 0.376 0.562
Red Blood Cell Phosphatidylethanolamine Fatty Acids	Standard Error	0.019 0.016 0.014 0.011	0.030 0.041 0.025 0.016	0.017 0.017 0.019 0.011	0.595 0.729 0.538 0.395	0.050 0.035 0.022 0.027
d Cell Phosp	Arithmetic Mean	0.053 0.054 0.047 0.045	0.243 0.251 0.235 0.230	0.080 0.055 0.078 0.053	17.319 17.101 17.225 18.138	0.440 0.390 0.390 0.596
Red Blood	c	37 38 56	32 38 56	37 38 56	37 32 38 56	33 38 38 38
•	Regimen	Control DHA DHA+ARA KM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM
	fatty Acid	12:0	14:0	14:1	16:0	16:1
	T ime	48 Weeks PCA	48 Veeks PCA	48 Weeks PCA	48 Veeks PCA	48 Weeks PCA

Table 10

	Pairwise p-value	0.347 0.483 0.020 0.000 0.001	0.401 0.234 0.067 0.118 0.005 0.758	0.024 0.187 0.000 0.000 0.000	0.879 0.590 0.029 0.061 0.014	
	Pairwise Comparison	Control vs DHA Control vs DHA+ARA HH vs DHA HN vs DHA+ARA Control vs HH DHA vs DHA+ARA	Control vs DHA Control vs DHA+ARA HM vs DHA HM vs DHA+ARA Control vs HM DHA vs DHA+ARA	Control vs DHA Control vs DHA+ARA HM vs DHA HM vs DHA+ARA Control vs HM DHA vs DHA+ARA	Control vs DHA Control vs DHA+ARA HM vs DHA HM vs DHA+ARA Control vs HM DHA vs DHA+ARA	
tty Acids	Regimen p-value	0.000	0.038	0.000	0.050	0.728
olamine fal	Median	7.174 7.552 7.173 8.409	19.410 19.534 19.433 18.141	9.267 8.696 8.840 6.027	0.182 0.171 0.158 0.112	0.146 0.145 0.125 0.240
natidylethan	Standard Error	0.327 0.293 0.270 0.230	0.368 0.421 0.332 0.278	0.261 0.210 0.216 0.193	0.020 0.031 0.021 0.012	0.058 0.042 0.037 0.031
Red Blood Cell Phosphatidylethanolamine Fatty Acids	Arithmetic Mean	7.935 7.962 7.443 8.754	19.438 19.066 19.302 18.469	9.328 8.867 9.257 6.291	0.198 0.219 0.188 0.129	0.263 0.262 0.212 0.295
ed Blo	c	32 38 38 56	37 38 38 56	332 34 26 88 24	37 38 56	37 32 38 56
	Regimen	Control DHA DHA+ARA HN	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM
	fatty Acid	18:0	18:1	18:2	18:3n6	20:0
	Time	48 Weeks PCA	48 Weeks PCA	48 Weeks PCA	48 Weeks PCA	48 Weeks PCA

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	Pairwise p-value	0.559 0.848 0.008 0.002 0.669	0.339 0.512 0.000 0.000 0.000		0.543 0.532 0.000 0.000 0.000	0.896 0.935 0.015 0.006 0.007 0.835
	Palrwise Comparison	Control vs DHA Control vs DHA+ARA HM vs DHA HM vs DHA+ARA Control vs HM	Control vs DHA Control vs DHA+ARA HM vs DHA HM vs DHA+ARA Control vs HM		Control vs DHA+ARA IM vs DHA HM vs DHA HM vs DHA+ARA Control vs HM DHA vs DHA+ARA	Control vs DHA-ARA Control vs DHA+ARA HN vs DHA HM vs DHA+ARA Control vs HM DHA vs DHA+ARA
ty Acids	Regimen p-value	0.001	0.000	0.057	0.000	0.012
olamine Fat	Median	0.225 0.262 0.245 0.169	0.648 0.782 0.738 0.492	0.003 0.000 0.000 0.019	0.698 0.684 0.689 0.412	1.999 2.045 2.132 1.637
hatidylethan	Standard Error	0.025 0.017 0.015 0.020	0.031 0.032 0.188 0.024	0.005 0.005 0.006 0.004	0.035 0.026 0.032 0.016	0.099 0.100 0.114 0.053
Red Blood Cell Phosphatidylethanolamine Fatty Acids	Arithmetic Mean	0.291 0.270 0.265 0.226	0.715 0.772 0.936 0.533	0.017 0.017 0.023 0.027	0.672 0.668 0.715 0.444	2.138 2.165 2.172 1.715
Red Bloo	c	32 32 38 56	37 38 56	37 38 38 56	32 38 56	37 38 56
_	Regimen	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM
	Fatty	18:3n3	20:1	18:4	20:2n6	20:3n6
	Time	48 Weeks PCA	48 Weeks PCA	48 Weeks PCA	48 Weeks PCA	48 Weeks PCA

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		Pairwise p-value				0.612 0.416 0.000 0.013 0.001	
		Pairwise Comparison			·	CONTROL VS DHA CONTROL VS DHA+ARA IM VS DHA IM VS DHA+ARA CONTROL VS IIM DHA VS DHA+ARA	
	ty Acids	Regimen p-value	0.950	0.121	267.0	0.001	0.943
	olamine Fat	Median	24.774 25.206 25.122 25.189	0.172 0.188 0.133 0.134	0.368 0.377 0.347 0.360	8.761 9.132 8.472 7.618	0.035 0.034 0.036 0.027
Table 10	natidylethan	Standard Error	0.536 0.491 0.429 0.384	0.016 0.022 0.022 0.013	0.026 0.015 0.011 0.016	0.267 0.250 0.188 0.203	0.016 0.009 0.008 0.016
	Red Blood Cell Phosphatidylethanolamine Fatty Acids	Arithmetic Mean	24.508 24.428 24.788 24.625	0.168 0.189 0.154 0.148	0.382 0.369 0.347 0.384	8.580 8.791 8.576 7.727	0.067 0.049 0.046 0.062
	ted Bloo	c	37 38 56	37 38 56	37 38 38 56	37 32 38 56	37 32 38 56
		Regimen	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM
		fatty Acid	20:4n6	22:1	20:5n3	22:4n6	24:1
		Time	48 Weeks PCA	48 Veeks PCA	48 Weeks PCA	48 Weeks PCA	48 Veeks PCA

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	Pairwise p∙value	0.977 0.997 0.000 0.000 0.000		0.884 0.148 0.000 0.000 0.000	0.000 0.000 0.000 0.000 0.000
	Pairwise Comparison	Control vs DHA Control vs DHA+ARA HW vs DHA HW vs DHA+ARA Control vs HW DHA vs DHA+ARA		Control vs DHA Control vs DHA+ARA HM vs DHA HM vs DHA+ARA Control vs HM DHA vs DHA+ARA	Control vs DHA-ARA Control vs DHA-ARA HM vs DHA HM vs DHA-ARA Control vs HM DHA vs DHA+ARA
tty Acids	Regimen p-value	000.0	1.000	0.000	0.000
olamine fat	Median	1.411 1.414 1.359 1.889	0.000	2.681 2.630 2.443 1.978	3.013 4.079 3.721 7.341
hatidylethan	Standard Error	0.066 0.057 0.054 0.056	0.000 0.000 0.000 0.001	0.092 0.086 0.066 0.065	0.159 0.177 0.134 0.201
Red Blood Cell Phosphatidylethanolamine Fatty Acids	Arithmetic Mean	1.401 1.353 1.364 1.883	0.000 0.000 0.000 0.000	2.567 2.561 2.436 1.942	3.196 4.143 3.801 7.283
ed Blo	c	32 38 36	37 38 38 56	37 38 38 56	3 3 3 3 4 3 4 3 4 3 4 4 4 4 4 4 4 4 4 4
_	Regimen	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM	Control DHA DHA+ARA HM
	Fatty	22:5n6	22:4n3	22:5n3	22:6n3
	Time	48 Weeks PCA	48 Veeks PCA	48 Weeks PCA	48 Weeks PCA

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Table 11 Preterm Infant Complications

		Regimen		p-value*
	Control	DHA	DHA+ARA	
Retinopathy of Prematurity Test Results Absent I II TI Present, but not graded	34 (76%) 8 (18%) 2 (4%) 1 (2%)	44 (76%) 11 (19%) 2 (3%) 1 (2%)	41 (79%) 6 (12%) 4 (8%) 1 (2%)	0.91
Ultrasound Examination for Intraventricular Hemorrhage None Stage 1 Stage 2 Stage 3 Stage 4 Questionable	47 (81%) 6 (10%) 3 (5%) 1 (2%) 1 (2%)	52 (84%) 9 (15%) 1 (2%)	49 (80%) 7 (11%) 2 (3%) 1 (2%) 2 (3%)	0.78
Posthemorrhagic Hydrocephalus developed? No Yes	61 (98%) 1 (2%)	65 (98%) 1 (2%)	64 (97%)	1.00

^{*}The statistical test was based on a dichotomous response: present or absent.

Table 12
Serious Adverse Events Reported During Study Formula Phase

		Regimen		
Event	Control	DHA	DHA+ARA	p-value
Any Event	4 (6%)	3 (5%)	4 (6%)	0.93
Other Respiratory Conditions of Fetus and Newborn	2 (3%)	0	0	0.10
Other Infection Specific to the Perinatal Period	1 (2%)	0	0	0.32
Intraventricular Hemorrhage	0	. 0	1 (2%)	1.00
Other Specified Perinatal Disorders of Digestive System	0	1 (2%)	0 .	1.00
Convulsions in Newborn	1 (2%)	0	0	0.32
Feeding Problems in Newborn	0	1 (2%)	1 (2%)	1.00
Hernia	0	0	1 (2%)	1.00
Other	0	1 (2%)	1 (2%)	1.00

Table 13
Serious Adverse Events Reported During the Term Formula Phase

		Reg	jimen		
Event	Control	DHA	DHA + ARA	HM	p-value
Any Event	7 (13%)	9 (15%)	9 (15%)	1 (1%)	0.002 C vs D 0.79 C vs D+A 0.79 D vs D+A 1.00 C vs HM 0.006 D vs HM 0.001 D+A vs HM 0.001
Infectious Colitis, Enteritis, and Gastroenteritis	0	o	1 (2%)	0	0.67
Croup	0	0	1 (2%)	0	0.67
Bronchopneumonia, Organism Unspecified	2 (4%)	3 (5%)	6 (10%)	0	0.013 C vs D 1.00 C vs D+A 0.27 D vs D+A 0.49 C vs HM 0.15 D vs HM 0.064 D+A vs HM 0.004
Asthma, Unspecified	1 (2%)	0	0	0	0.21
Esophageal Reflux	0	1 (2%)	2 (3%)	0	0.23
Dyspepsia and Other Stomach Function Disorder	0	0	O	1 (1%)	1.0
Other Respiratory Conditions of Fetus and Newborn	1 (2%)	1 (2%)	3 (5%)	0	0.11
Convulsions	1 (2%)	0	0	0	0.21
Sudden Infant Death Syndrome	1 (2%)	1 (2%)	0	0	0.34
Hernia	2 (4%)	2 (3%)	0	o	0.11
Other	0	3 (5%)	2 (3%)	0	0.063

Appendix 1

				Listing of Weights included in the Statistical Analyses	of Weight	s Includ	led in th	e Statis	tical An	alyses						
													Growth Rate		:	•
400	Continue	Subject	Variable	Wgt1	Vgt2	Wgt3	Ng t 4	Vgt5	Vgt6	Wgt7	Wg t 8	Wgt9	g/day	Vgt_40	Vgt_48	Vgt_57
nender Hale	Control	9698-0301	Weight (g)	1120	1240	1360	1590	1870 34.1					27.72			
Male	Cantrol	9698-0304	_	1450	1630	1940	2180 35.4						36.1	3731 40.3	5752 48.3	6816 56.6
Male	Control	9699-0302	Age (weeks pra) Veight (g) Age (weeks pca)	958.0	1108	1251 32.7	1378	1659 34.7					23.9	39.9	4993	6553
Hale	Cantrol	90£0-6696	Weight (g) Age (weeks pca)	1185	1261 32.0	1437	1647 34.0	1933 35.0					56.9	3575 40.3	4936	57.1
Male	Control	9699-0308		1600	1840	2752 38.3							43.3	3688	48.3	57.3
Male	Control	9700-0301	Veight (g) Age (weeks pca)	1810	1855 32.6	2075	2330	2595 35.4	3120				36.2	5745 40.1	47.6	56.7
Male	Control	9701-0303		1181	1298	1494	1785 35.4	2012 36.3					31.5	3070	3895 48.6	4965 57.6
Hale	Control	9701-0304		1412 31.9	1566	1851	2117	2318 35.9		•			34.1	39.9	5445	7135 56.9
Male	Control	9702-0302		1480	1775	2045 33.0	2240 34.0	2340 34.6	2570 35.6				33.8	3590	4840 48.6	58.4
Male	Control	9703-0302	Veight (g) Age (weeks pca)	1785 33.3	2040 34.6	2375 35.6	2685 36.4	2955 37.4					41.7	3620	48.6	57.3
Male	Control	9703-0304	Weight (g) Age (weeks pca)	1475	1705	1920 34.0	2190	2425 35.7					34.2	40.1	47.7	57.1
Hale	Control	9703-0308	Weight (g) Age (weeks pca)	1140	1230	1445	1665	1945 35.7					28.9	39.7	49.6	56.9
Hale	Control	9704-0303		975.0 32.3	1205	1270 34.4	1450 35.4	1665	1760 37.3	2045 38.3			54.42	39.3	48.3	57.4

four subjects had more the 9 weights used in growth rate calculation. A complete listing appears on the last page.

Appendix 1

Listing of Weights Included in the Statistical Analyses

												_	Growth Rate		9	2
Sender	Regimen	Subject	Variable	Vgt1	Wgt 2	Wgt3	Hgt¢	Ngt5	Vgt6	Vgt7	Wgt8	Hac9	g/day	Wgt_40	18t - 48	/c_16M
Male	Control	9704-0305	Veight (9)	1315	1475	1640 33.0	1860						23.7			
Male	Control	9705-0302		1280	1389 34.0	1588 35.0	1786 36.0	2240					30.9	2540 39.6	4636	5646 56.4
Kale	Control	7020-5026		1270	1280 32.3	1570 33.3	1810 34.6						25.3	3291 39.7	5816 47.7	7490 56.7
Male	Control	9706-0302		1645 35.7	1865 36.6	2130 37.7	2435 38.7						37.1	2800	48.7	56.7
Male	Control	500-9026	Weight (g) Age (weeks pca)	1875	1984	2135 35.6	2185	2465					22.2	3050	48.6	56.9 56.9
Male	Control	9706-0308		1655 32.9	1734 33.1	2005	2495 35.4						6.95	3835	5155 48.0	6090 56.3
Male	Control	9707-0302		1544	1820 32.9	2215 34.4	2450 35.4	2460 35.7	•				32.8	2930	3795	5185 56.6
Hale	Control	9707-0303		1415	1600 34.1	1850 35.1	2195 36.6	2310 37.1		•			32.7	2530 39.7	4235	6530 57.1
Nale	Control	9707-0309		1046	1442 32.7	1644	1910 34.9						30.7	2965 39.9	4465	
Male	Control	9708-0303		1730 32.7	1960	2205 34.7	2520 35.7						37.4	3680 40.1	5470 48.1	7330 57.0
Male	Control	9709-0302		1090	1440	1660 32.7	1910	2040 34.3					30.8	3845 39.9	5700 48.0	6775 56.7
Hale	Control	9712-0301*		1245	1221 31.7	1245	1291 32.0	1294 32.1	1330 32.3	1369 32.4	1402 32.6	1433	26.1			9
Hale	Control	9712-0302	Weight (g) Age (weeks pca)	1292	1345	1456 35.1	1670 36.1	1835 37.1	1985 38.1				21.0	2160 40.1	3300	3980 57.3

* Four subjects had more the 9 weights used in growth rate calculation. A complete listing appears on the last page.

Appendix 1

Listing of Weights Included in the Statistical Analyses

								(•	9	9	Growth Rate	07	87 Jon	Uat 57
Gender	Regimen	Subject	Variable	Vgt1	Wgt2	Wgt3	HBC4	Vgt5	Wgt6	Ngt/	Vgts	V BT9	Ago/B			
Male	Control	9743-0301	Weight (g) Age (weeks pca)	1520	1570 35.0	1670 36.0	1720 37.1						10.0	2260 41.0	4535 50.0	
Male	Control	9746-0301	_	2065	2465	2760	3085	3085					48.9	3085	47.6	9999 97.6
Mate	DHA	9698-0302		1640	1860 36.1	3170 39.9							47.5	39.9	\$206 47.9	7036 57.1
Male	DHA	9698-0306		1620 35.1	1830 36.3	2090 37.3	2575						28.3	2575	4334	6022 57.0
Male	DHA	9699-0301	Weight (g) Age (weeks pca)	1018	1207	1360 33.3	1617 34.3						27.9	3121	5192 48.0	6/35 57.9
Mate	DIIA	\$050-6696	Veight (g) Age (weeks pca)	1258	1435	1631	1882 35.4	2724 36.4					48.3	2724	4341	5674 57.0
Mate	DIIA	2050-6696	Weight (g) Age (weeks pca)	1182	1358 35.7	1484 36.7	1666 37.7						22.5	1986	3206	4511 57.0
Male	DHA	9700-0303	Weight (g) Age (weeks pca)	1830	1980 34.4	2450 35.9	3045						42.4	3585 39.6	5450 47.4	7035 56.7
Male	DHA	9701-0301	Weight (g) Age (weeks pca)	1098 29.6	1234 30.6	1365	1689 33.4	1902 34.6	2019 35.6	2104 36.4	2276 37.4	2288 38.6	20.4	2805	3405	0795 27.0
Male	DIIA	9701-0305		1621	1829	1880 33.7	2253	2582 35.7					34.7	39.7		
Male	рна	9703-0303		1775	2030 34.1	2285 35.1	2595 36.0	2780 37.1					38.2	3080 39.9	3940	5260 56.9
Male	DHA	9050-5026		1725	1870 34.0	2180 35.0							41.7			
Male	DIIA	9703-0307	Weight (9) Age (weeks pca)	1525 32.7	1725	2020 34.9	2390 36.0						37.6	3120 40.7	6.72	56.9

four subjects had more the 9 weights used in growth rate calculation. A complete listing appears on the last page.

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Listing of Weights Included in the Statistical Analyses

Appendix 1

				LISTING OF MCIBILIS IN	- B											
							•						Growth Rate			
		•	9	Uot 1	Vat 2	Ngt3	Mgt 4	Wgt5	Vgt6	Hgt7	Wgt8	Ngt9	g/day	Mgt_40	Wgt_48	Wgt_57
Gender	Gender Regimen Male DHA	Subject 9704-0304	Val lauc Weight (9)	1380	1570	1730	1960	2140					29.3	2880	3900	4300
		1050, 1050	Age (weeks pca)	1320	1370	1550	1760	2020	2170				5.6		3750	4800 57.0
Male	VIIO	4/04-0300	Age (Weeks pca)	30.7	31.7	32.7	33.7	34.7	5. .4				9 02	0770	4170	5787
Male	DIIA	9705-0303	Veight (g) Age (weeks pca)	1380 33.0	1446 34.0	1616 35.0	1843 36.0	2330 37.4					30.8	39.6	47.4	56.4
Hale	DHA	9705-0305	Weight (g) Age (weeks pca)	1490	1770 32.1	1980 33.1	2240 34.0	•					36.7	3291	. 3763	600
Male	DIIA	9060-9076	Weight (9) Age (weeks pag)	1490	1655	1915	2260 36.0						36.8	40.0	48.1	57.3
Hale	DISA	9706-0306	Veight (9)	1604	1908 35.4	2160							42.8	3310	4205	5600 56.9
Male	DHA	9707-0001	Weight (9)	1305	1429								17.71			
3	DHA	9707-0304	Age (weens pre)	1555	1740	1990	2400	2570					36.9	3280 39.9	5115 48.0	6755. 57.6
1 d	OH P	9707-0306	Age (weeks pca) Weight (g)	1728	2040	2260	3050	3050					43.2	3050 40.6	5100 48.6	7150 57.6
X a	DIRA	*707-0307*	Age (weeks pca) Weight (g)	1649	1675	1699	1732	1778	1811	1858 33.3	1882 33.4	1938 33.6	39.6		•	
Hale	DHA	9707-1308	Age (weeks pos) Weight (g)	1780	2045	3004	3004						36.7	39.3	4420	57.7
Male	DHA	9707-2308	Weight (g) Age (weeks pca)	1651 34.4	1923	2850	2850 39.3						35.8	39.3	4375	5930 57.7 6256
Male	DHA	9708-0302	Veight (g) Age (weeks pca)		1740	2500							39.7	42.9		57.3

* four subjects had more the 9 waights used in growth rate calculation. A complete listing appears on the last page.

Appendix 1

Listing of Weights Included in the Statistical Analyses

													Growth Rate		!	;
Gender	Regimen	Subject	Variable	Wgt1	Ng c 2	Wgt3	Ngt4	Wgt5	Wgt6	Ngt7	Wg t 8	Vgt9	g/day	Ngt_40	Wgt_48	Wgt_57
Male	DHA	9709-0301	Veight (g) Age (weeks pca)	1490	1740	2000 34.4	2400	2800 36.7			•		4.4	3150 39.4	5080 47.4	6750 56.4
Male	рна	9709-0304	Weight (g) Age (weeks pca)	1470	1520								7.1			
Kale	DIIA	9712-0304		1545 33.0	1800	1985 35.0	2160 36.0	2550 37.6					30.5	3160	5200 48.1	7300 57.1
Male	DIIA	9712-0306		1240 31.5	1435 32.5	1695	1945						33.9	39.6	4680	5860 57.6
Male	DHA	9743-0303	Weight (g) Age (weeks pca)	1700	1810 33.9	2100	35.7						31.1	3100	5500	
Hate	DHA	9743-0304		1530 32.3	1880 34.0	2160 35.0	2375 36.0	2440 36.4			•		32.2	3628	5840 50.6	
Male	DHA+ARA	9698-0305		1120	1340 32.6	1550 33.6							20.9	37.4	5525 47.6	9999 20.6
Male	DIIA+ARA	9050-8696		1410	1690 32.4	1870	2120						32.0	3553	9°2'5	7937 57.3
Hale	DIIA+ARA	6696-0304		1499	1689 37.1	1950 38.1	2355						29.8	2355	3404	4993 57.1
Male	DIIA+ARA	9699-0305		1056 32.0	1134	1290	1490						17.2	2610 40.6	4256	5050 57.6
Hale	DIIA+ARA	DIIA+ARA . 9700-0302		1635 33.9	1880	2235 35.9	2570 36.9	2735 37.9					40.7	3255	5540 47.7	7380 56.7
Male	DHA+ARA	9701-0302	Weight (g) Age (weeks pca)	1442	1686 34.6	2045	2835						48.9	3240	5055	6600 56.7
Male	DHA+ARA	9701-0306		1587	2037	2245	2460	2756 36.3	3072	3228 37.7			41.4	3960	5200 48.4	

* Four subjects had more the 9 weights used in growth rate calculation. A complete listing appears on the last page.

Appendix 1 Listing of Weights Included in the Statistical Analyses

1	9	ر د د	d da	Vat1	Hqt2	Ng t 3	Waté	Ngt5	Vgt6	.Wgt7	Vgt8	Ngt9	Growth Rate g/day	Ngt_40	Wgt_48	_
vender Male	Regimen DHA+ARA	9701-0307	Weight (g)	1397	1710	1919 35.1	2932 38.4						42.5	3445 40.6	5930 48.6	
Male	DHA+ARA	9702-0301	Weight (g) Age (weeks pca)	1670 32.0	1865 33.0	2160 34.0	2660 36.0						36.0	3780 40.6	5250 47.6	
Mate	DIIA+ARA	9702-0303	Veight (g) Age (weeks pca)	1650 32.9	1905 33.9	2660 36.4							40.7	3500	5160 48.0	
Male	DHA+ARA	9703-0301	Weight (9) Age (weeks pca)	1255 29.4	1460 30.4	1745	2055 32.3	2415 33.4					42.3	4350	6020	
Kale	DIIA+ARA	9703-0305	Veight (g) Age (weeks pca)	1440 32.0	1635 33.0	1830 34.0	2115 35.0	2390 36.1	2590 36.9				34.1	3170 40.0	4330 47.9	
Hale	DHA+ARA	9704-0301	Veight (g) Age (weeks pca)	1110	1270	1490 32.4	1740	2050 34.4					35.1	3220 39.9	5460 47.7	
Hale	DHA+ARA	9704-0302	Weight (g) Age (weeks pca)	1080	1230	1370	1520 34.9	1680 36.0	1840 36.9				22.2	2570	6540 48.1	
Male	DHA+ARA	9705-0301	Height (g) Age (weeks pca)	1300	1440	1620 34.7	1870 35.7						27.0	2979 40.1	4400	
Male	DHA+ARA	9705-0306	Weight (g) Age (weeks pca)	1320	1490 32.4	1700 33.4	2020 34.4	2300					32.7	3631	87.7 67.9	
Male	DHA+ARA	9705-0307	Weight (g) Age (weeks pca)	1480 34.4	1650 35.4	1810 36.1	2240 37.4						36.4	3007	5589	
Male	DIIA+ARA	9706-0305	Weight (g) Age (Weeks pca)	1330 33.9	1455 34.4	1660 35.4	1930 36.6						31.4	39.9	4820	
Hale	DHA+ARA	9706-0307	Weight (g) Age (weeks pca)	1355	1585 33.0	1825	2270 35.1						40.0	3585	5955 49.1	
ма(е	DHA+ARA	9706-0309	Weight (g) Age (weeks pca)	1620 34.1	1910	2150							40.3	3460	5255 48.7	

* Four subjects had more the 9 weights used in growth rate calculation. A complete listing appears on the last page.

Appendix 1

						•										
				Listing	of Weigh	ts Inclu	Listing of Weights Included in the Statistical Analyses	he Stati	stical A	inalyses						
												•	Growth Rate			
Gender	Regimen	Subject	Variable	Wgt1	Vgt2	Vgt3	Vgt4	Wgt5	Ngté	Vgt 7	Wgt8	Hgt9	g/day	Ngt 40	Vgt_48	Vgt_57
Male	DHA+ARA	9707-0301	Height (g) Age (weeks pca)	1553 32.6	1980 34.3	2280 35.3	2720 36.6						41.5	3395	6.72 47.9	6285 56.9
Xa c	DHA+ARA	9707-0305	Weight (g) Age (weeks pca)	1755	1990	2245	2505	2770 37.7					37.4			
Male	DHA+ARA	9707-0310	Weight (g) Age (weeks pca)	1620 32.7	1628 33.7	2140	3195						8.77	3585 39.7	5170 47.9	6725 56.3
Male	DHA+ARA	9708-0301	Veight (g) Age (weeks pca)	1640 32.7	1880	2200 34.7	2420						38.0	3730	4835	6185 57.0
Male	DHA+ARA	9708-0304	Weight (g) Age (weeks pca)	1680 34.6	2180 35.9								55.6			
Kale	DHA+ARA	9709-0303	Weight (g) Age (weeks pca)	1470	1810 33.6						ē		48.6			
Male	DHA+ARA	9709-0305	Weight (g) Age (weeks pca)	1410	1655 35.4	1900 36.4	2160 37.4						35.6	2630 39.7	4570	5520 57.1
Male	DHA+ARA	9712-0303		1180	1210 32.3	1450 33.4	1590						50.9	2520	3500	5010 56.4
Male	DHA+ARA	9712-0305	Weight (g) Age (weeks pca)	1325	1505 32.5	1785 33.5	2010	2300 35.6					34.1	3030 39.6	4350	5510 57.6
Hale	DHA+ARA	9723-0301	Weight (g) Age (weeks pca)	1630 33.9	1728 34.9	1961 35.9	2214 36.9						28.4	3104		5986 58.9
Male	Ħ	9698-0601												3518	5497	6582 56.9
Hale	¥	9698-0602												3177	5220 48.1	6355 57.0
Male	Ŧ	9698-0603												3858	5447	6454 57.0

* Four subjects had more the 9 weights used in growth rate calculation. A complete listing appears on the last page.

Appendix 1

Listing of Veights Included in the Statistical Analyses

													Growth			
Gender	Regimen	Subject	Variable	Wgt1	Vgt2	Vgt3	Hgt¢	WgtS	Ngté	Ngt7	Wgt8	Wgt9	g/day	05-16M	Wgt_48	V9t_57
Mate	¥	7090-8696									-			4355 40.0	5092 48.0	6383 57.0
Male	¥	9698-0605												3433	4979	6426 57.1
Male	¥	9699-0501												3915 40.0	6639	7773 57.4
Male	¥	9699-0502												3802	5787	7178 57.4
Hale	¥	9701-0601												3317	67.75 47.9	7070 56.4
Hale	¥	9701-0602												3487	5833	8070 58.3
Hale	3	9701-0603												3232	7.25 7.67	5855 56.4
Male	ĸ	9701-0604												3600	5215 47.9	6285 56.9
Male	Ŧ	9701-0605												3402	5575	7210 57.6
Mate	¥	9090-1026												3090	4485	5445
Hale .	æ	9702-0601												3480	5780 48.6	6530 56.6
Hale	₹	9702-0602												3165	5060	6660 57.1
Male	Ŧ	9703-0502												2670	5420	7220 57.1

* four subjects had more the 9 weights used in growth rate calculation. A complete listing appears on the last page.

Appendix 1

Listing of Weights Included in the Statistical Analyses

				Citating of weights of	10124 17											
					9	7	7440	7,017	y you	Vot7	Vot8	Nat9	Growth Rate g/day	Vgt_40	Wgt_48	Wgt_57
Gender	Regimen	Subject	Variable	Ngt1	Mar 2	C) 6A	7		2	; n				7100		8330
Mate	¥	9703-0503												40.0	7.74	56.4
Male	壬	9030-8026												3435 40.0	6000	7930 57.1
Hale	¥	9704-0502												3285 40.0	5220 48.1	6560 56.6
Male	¥	9704-0503												3400	5200 48.7	6725 56.9
Male	¥	9705-0601												3200	5617 48.3	6752 57.3
Male	¥	9705-0602							•					3860	6227 48.0	
Hale	ī	9706-0601	·											3152 40.0	5105 49.0	6545 57.0
Kale	¥	9706-0602								•				3557	5175 47.4	7315 57.7
Male	¥	9706-0603												3192	5070 47.9	6970 56.7
Male	Ŧ	9090-9026												3461 40.0	4225	5525 57.1
Hale	垩	9706-0605				•								3870 40.0	6220 48.1	7,980 56.4
Kale	¥	9090-9026												4315	5975 48.3	6720 56.6
Mate	¥	9707-0601												3263	4730	5825 57.0

* four subjects had more the 9 weights used in growth rate calculation. A complete listing appears on the last page.

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		Vgt_57	6220 57.7	8810 57.0	6130 56.7			6870 56.9	6370 57.0		6595 56.4		6327 57.1		
		Vgt_48	4515 48.1	6930	5460		\$825 48.4	5410 47.9	5135		5220 47.6		5135		
		Vgt_40	3206 40.0	4256	3419 40.0	3433	3603	3569	3348	3348	3064	4085	3319	3291 40.0	3796 40.0
		Growth Rate g/day													
		Vgt9													
	us.	Hgt8													
	Analyse	Vgt7													
	tistical	Wgt6													
-	Listing of Weights Included in the Statistical Analyses	Hgt5													
Appendix 1	studed in	Ngt¢													
	ights Inc	Wgt3													
	ng of Vei	Wgt2													
	Listir	Wgt1													
		Variable													
		Subject	9707-0602	9707-0603	9707-0604	9707-0605	9707-0606	9707-0607	9707-0608	9707-0609	9708-0601	9708-0602	9708-0603	9090-8026	9708-0605
		Regimen	¥	¥	₹	¥	Ŧ	¥	Ŧ	Ŧ	₹	¥	Ŧ	.₹	¥
		Gender	Hale	Male	Male	Male	Hale	жаве	Hale	Hate	Nale	Male	Nale	Male	Hale .

four subjects had more the 9 weights used in growth rate calculation. A complete listing appears on the last page.

Appendix 1

Listing of Weights Included in the Statistical Analyses

						(•		1	9	9	Growth Rate	07 401	87 400	75 400
Gender	Regimen	Subject	Variable	Wgt1	Vgt2	Ngt3	Wgt4	Wgt5	Wgt6	Mgt/	Wgt8	M819	g/day	0 - L	05 16A	7 1 7
Male	¥	9708-0606												40 50	4645	5405 57.1
Male	¥	9708-0607												3333	4043	5180 56.7
Male	¥	9709-0505												3400		
Female	Control	\$698-0003*	Veight (g) Age (weeks pca)	1020 31.1	1050	1070	1080 31.6	1080	1060 31.9	1080 32.0	1070 32.1		5.6			٠
Female	Control	1000-6696	Veight (g) Age (weeks pca)	1464	1672 33.7	1862 34.7	35.7	2145 36.7					24.1	2610 39.7	4369	5220 56.9
Female	Control	£000-6696	Veight (g) Age (weeks pca)	1473	1629 35.0	1860 36.0	2497 38.0						37.3	2780 40.0	0°87 78°0	5816 57.0
Female	Control	9701-0003	Weight (g) Age (weeks pca)	1480 34.6	1633	1903	1975 37.3	2292 38.6					29.1	2675 40.6	4165 48.6	5200 55.6
Fenate	Control	9701-0005	Weight (g) Age (weeks pca)	1174	1366	1555 32.7	1745 33.7	1976 34.7		•			28.3	3175	5140 48.4	6280 56.4
Female	Control	9701-0008	Veight (g) Age (weeks pca)		1569	1898 36.4	2198	2406 37.9					41.1	2980	4425	5815 56.4
Female	Control	9701-0011	Weight (g) Age (weeks pca)		1254 31.4	1492 32.4	1756 33.4	2044					36.6	2870 39.7	4420	5505 57.4
Femate	Control	9702-0002	Weight (g) Age (weeks pca)	1222	1371	1570	1750 35.1	1995 36.0	2390				29.4	3380	47.6	
Female	Control	7000-2026	Weight (g) Age (weeks pca)	1454 31.0	1555	1840 33.1	2530 36.0						31.6	39.9	5160 47.7	6900 56.7
Female	Control	9702-0010	Weight (g) Age (weeks pca)	1775	2065	2410 36.0	2645 37.0						42.2	3060 39.9	4820	6690 57.6

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* Four subjects had more the 9 weights used in growth rate calculation. A complete listing appears on the last page.

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Appendix 1 Listing of Weights Included in the Statistical Analyses

Vat 57		5640	6410 56.1	5646 55.0		5305	7225 53.4	6535 56.7		5297 56.6	4995	7250 57.3	6920 57.3
Vot 48	0525	4330	47.7	9°95 40°9		4165	9.74 47.6	5390	3800	48.7	4125	5385	5490 48.9
07 TO	3210	2610 37.3	3360	2722 39.7		2740 40.0	3640	3655	2680	3320	3110	3430	3330
Growth Rate	26.4	29.5	48.3	28.3	37.9	31.7	31.6	56.0	31.1	32.6	30.2	41.2	39.9
0													
8	2												
7201													
4	2130	7									2765 38.3		
4	1825	2220	2685 36.6								2325		
ì	1570	1900	2445	1660 34.0	2330	2150 36.0			1810 34.6		2010		
1	1390	1765	2095	1490	1965 37.1	1805	1960 34.3		1585	1935	1655 33.6	3430	3330
,	1250	1590	1715 34.0	1290	1673	1610 33.7	1620 32.9	2185 35.0	1270 32.4	1765 33.1	1505 32.6	3430	3330
•	Mgt1	1420	1495	1120	1515	1485 33.0	1525 32.3	1905	1185	1510 32.0	1465 32.0	1866 34.6	1815 34.6
:			Age (weeks pca) Weight (g) Age (weeks pca)		Veight (g) Age (weeks pca)	Veight (g) Age (weeks pca)	Veight (g) Age (weeks pca)	Weight (g) Age (weeks pca)					
į	Subject 9703-0002	9703-0005	9703-0008	9000-5026	9706-0003	9706-0005	6000-9026	9706-0010	9706-0013	9706-0016	\$000-2026	9000-2026	Control 9707-1006
	Regimen Control	Control	Control	Control	Control	Control	Control	Control	Control	Control	Control	Control	
	Gender Female	Female	Female	Female	Female	Female	Female	Female	Female	Female	Female	Female	Female

* four subjects had more the 9 weights used in growth rate calculation. A complete listing appears on the last page.

Appendix 1 Listing of Veights Included in the Statistical Analyses

												•	Growth Rate	4	a .	1 5 4 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5
Capter	Regimen	Subject	Variable	Ngt1	Wgt2	Vgt3	Mgt4	VgtS	Vgt6	V gt7	WgtB	Ugt9	g/day	04 ⁻ 36A	35.	
female	Control	9708-0001	Weight (g) Age (weeks DCa)	1410	1600	1850	2050 36.9						27.2	2910 40.6	4734	
Female	Control	9708-0003	Weight (g)	30.0									4.3			
femate	Control	9708-0008	Neight (9) Age (weeks pca)	1380		1860 34.9	2180 36.3						33.1	2582 39.3	4110	5361 57.1
Female	Control	9709-0002	Weight (g) Age (weeks pca)	1980 32.7		2400							30.0		;	č
Fernale	Control	9709-0005	Weight (g) Age (weeks pca)	1175		1665 34.6	1945	2200 36.3					32.3	2975 39.6	4700	56.7
female	Control	9712-0005	Weight (g) Age (weeks pca)	972.0 29.1		1290	1490	1695 33.1					25.6	2930	4450 47.6	5880
Female	Control	9712-0006	Weight (g) Age (weeks pca)	1203		1585	1790						28.4	3030	48.0	6230 57.0
Female	Control	9743-0003	Weight (g)	1300		1740	1890						24.0		48.4	5160 57.4
Female	Control	9746-0001	Weight (g) Age (weeks pca)	1420 32.6		2075 34.6	2320 35.6	2625 36.6					42.7	3170 39.7	4145	5192
Female	DIIA	9000-8696	Weight (g) Age (weeks pca)	1410		1890 32.1	2140 33.1						34.7	3787 40.0	4795	6291 57.0
Female	DIIA	9000-8696	Weight (g) Age (weeks pca)	1110		1420	1720 33.7						28.7			
Female	в ОНА	6000-8696		1205	1310	1520 32.4	1630	2020 34.9					25.9	2891	3979	5121 57.0 6695
Female	е рия	9698-0307		1790 34.4		2450 37.6							7.67	39.4	4.74	56.4

* Four subjects had more the 9 weights used in growth rate calculation. A complete listing appears on the last page.

Appendix 1 Listing of Weights included in the Statistical Analyses

1 05 16W	7715 0 31	39.7	3210	40.1	34.2 2910 4325 39.6 48.0	4020	39.7		37.2 2970 4605 39.9 47.7	1850	40.0	2650	39.6		3540 39.6	0272	39.4 48.0	2870 39.4
Wgt6								2685 39.6										
Wgt5	•	2380 36.9		36.3				2685 39.6						2035			2150 38.1	
Vgt4	7	1929 35.9	1	2295 35.3	1924	0.00	1671 33.7	2311	2455		3000		39.6	1965	3540	34.0	1845 37.1	1795
.lot3		1669 34.9		2050 34.3	1586	33.0	1441 32.7	2151	1858	7.66	2390	•	2650 39.6	1780 33.6	3540	39.6	1535	1550
								1928										
_	1 1 1 1 1 1 1	1313						1674									1255	1170
_	Variable	Weight (9)	Age (Weeks pour			pca)		Weight (g)										10 the 100
	Subject	2000-6696		1000-0026	0701-0001		9701-0004	9701-0012	9201-0016		9702-0001		9702-0006	9702-0007	9202-0008		9703-0003	
	Regimen	DHA		DHA	,	Š	DHA	DHA		<u> </u>	DHA		DHA	DHA	į	¥ II	DIFA	
	Gender R			Fernale D		Female	Female	Female		remare	Female		Female	Female	•	Female	Female	

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Appendix 1 Listing of Weights Included in the Statistical Analyses

													Growth Rate			ļ
		400	a de	Wgt1	Ngt2	Vgt3	Ngt4	Vgt 5	Vgt6	Ngt7	Ngt8	Wgt9	g/day	Mgt_40	Vgt_48	Ngr_57
Gender	Regimen	9204-0004	Veight (g)	1440	1670	1740							30.5	3100 40.0	5830 48.0	8630 57.0
	9	5000-7026	Age (weeks pca) Weight (9)	1050	1310	1490	1700	1890					30.0	3360 39.6	48.0 48.0	6100 57.0
			Age (weeks pca) Weight (9)	1220	1370	1590	1880	2098					31.9	3092	4795	5986 57.1
remate			Age (weeks pca)	32.7	33.6	7.42	1930						31.7	2705	4145	5320
Female	DHA	9000-9026	Weight (g) Age (weeks pca)	33.0	33.7	34.7	36.0						2,5	2120	<u>.</u>	<u>:</u>
Female	DKA	9706-0008	Weight (g) Age (weeks pca)	990.0 33.4	1188 34.6	1345 35.7	1485						?	39.9		
Female	DHA	9706-0012	Weight (g)	1610	1830 32.4	2130 33.6	2280 34.6						32.5	3530 40.1	48.4	e 8
Female	DHA	9706-0014	Weight (9)	1080	1170	1395	1560	1804					26.2	3295	5600 49.4	58.0 58.0
		2007-0006	Age (Weeks pca) Veight (9)	1635	1771	2850							38.1	3045	4595	5765 57.0
Female	OHA A	1016	Age (weeks pca)	34.0	35.0	38.7							6 67	3440	4800	6360
Female	DIIA	9707-0308	Weight (g) Age (weeks pca)	2005	39.3	39.3								39.3	47.3	57.7
Female	DHA	9000-8026	Weight (g) Age (weeks pca)	1460 32.6	1665 33.6	1955 34.6	2280 35.6	2485 36.6					1.00	,	,	9237
Female	DIIA	9708-0006	Veight (g) Age (weeks pca)	1485 33.7	1775	2110 35.7	2380 37.0						39.5	40.1	4950	57.0
Female	e DKA	9709-0001		1250 29.6	1490	1755 32.0	1970 33.0	2250 34.0	2520 35.0				6. C.	40.1	4080	2420
Female	е ОНА	9709-0003	Height (g) Age (Weeks pca)	1540	1725 35.4	2015 36.4	2155						3	40.3	47.7	57.1

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Appendix 1 Listing of Weights Included in the Statistical Analyses

													Growth Rate		(!	
Gender	Regimen	Subject	Variable	Vgt1	Hgt2	Ng t 3	Hgt¢	WgtS	Wgt6	Wgt7	WgtB	Ngt9	g/day	Vgt_40	Ngt_48	Ngt ∑/
Female	ОНА	9712-0001	Weight (g) Age (weeks pca)	987.0 30.0	1120 31.0	1270 32.0	1470	1685 34.0					24.9	2940	3980 48.1	5250 57.1
Female	DIKA	9712-0002		1060	1230 33.7	1430							26.4			
Female	DIIA	9712-0007	Weight (g) Age (weeks pca)	1082 32.7	1230	1440	1650 35.7						27.3	2425 39.7	4250	5340 56.9
Female	DIIA	9743-0001		1000 32.1	1170	1470 34.4	1800	1930 36.1					33.5		4140	5400
Female	DIIA	9743-0002	Weight (g) Age (weeks pca)	1380	1570	1845	1975 35.1						29.7		48.4 48.4	5160 57.4
Female	DIIA+ARA	1000-8696			1690 32.6	33.6	2380						37.1	3530	5348	6582 56.7
Female	DHA+ARA	9698-0002			1870 33.7	2130 34.6	2260 35.7						31.8	3241 40.7		
€emate	DHA+ARA	7000-6696	Weight (g)		1122	1283 33.0	1536	1788 35.0					28.9	3177	5107	6979 57.3
Female	DIIA+ARA	5000-6696			1542 32.9	1688 33.9	2000	2330					35.1	4050	6752 48.0	8341 57.0
Fenale	DHA+ARA	9700-0002			1525	1885 32.3	2035	2220 34.1	2480 35.6				31.9	3340	4930	6420 57.1
Female	DHA+ARA	9701-0002			1609	1887	2210 36.4	2420 37.4					37.8	2930 39.4	5115 48.4	6525 56.4
Female	DIIA+ARA	9701-0006	ueight (g) Aga (weeks pca)	1720 32.3	1859	2113	2456 35.3	2728 36.1					38.3	3600	5045	6270
Female	DHA+ARA	9701-0007	Weight (g) Age (weeks pca)		1427	1590	1982	2227 37.7					29.8	2680 39.9	4935	6955 56.9

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Appendix 1 Listing of Weights Included in the Statistical Analyses

3 Wgt 57					5340 56.4								5050	
Ngt 48		5545 48.4	48.7	6220 48.4	4300	4680	4250	5400 48.1	4190	5150 48.0	5400 48.0	5107	4000	6550 48.6
Nat 40		3500		4190 40.0	3025 40.0	2905 39.9	3030	3600	2850 40.0	3110 40.0	40.0	3376 39.9	2600	4100
Growth Rate a/day	i i	34.6	35.6	39.9	29.9	6.02	28.9	49.1	27.4	26.7	30.0	8.67	22.1	34.5
Uat 9	in B												1380	
No.													1350 33.3	
Unt7	D									2070 34.9			1265 33.0	
7400	0164	2759 37.7							2240 36.6	1780 33.9			1310	
4	CIBM	2433 36.1		2400	2710 38.0	2655 37.3	1955 35.3		2030 35.7	1570 32.9			1310 32.4	
1	#16A	2234 35.3		2155	2525 37.0	2595 37.0	1680	2880 37.0	1880 35.0	1370		2920 37.7	1280 32.1	2060
,	C16H	1978 34.4		1820 32.1	2300	2230 36.0	1450	2560	1620 34.0	1200 30.9		2500 36.6	1185	1685
9	Wgtz	1703 33.4	2019	1488 31.1	2060 35.0	2000	1255	2200 35.0	1495	1090	1840 33.4	2260 35.7	1120	1515
	Mgt	1488 32.3	1841 33.0	1293	1895 34.0	1725 34.0	1145			960.0	1690	1760	1075	1290
	Variable	Weight (g) Age (weeks pca)	Veight (g) Age (weeks pca)	Veight (g) Age (weeks pca)	Veight (g) Age (weeks pca)	Weight (g) Age (weeks pca)	Veight (g) Age (weeks pca)	Weight (g) Age (weeks pca)	Veight (g) Age (weeks pca)		Veight (g) Age (weeks pca)			Veight (g) Age (weeks pca)
	Subject	9701-0010	9701-0013	9702-0003	9702-0005	9702-0009	9703-0001	9000-5026	9703-0007	9704-0002	5000-5026	9705-0003	*5000-5026	9706-0001
	Regimen	DHA+ARA	DIIA+ARA	DHA+ARA	DHA+ARA	DIIA+ARA	DHA+ARA	DHA+ARA	DIIA+ARA	DHA+ARA	DHA+ARA	DHA+ARA	DHA+ARA	DHA+ARA
	Gender	Female	Female	Female	Female	Female	Female							

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Appendix 1

Listing of Weights Included in the Statistical Analyses

* four subjects had more the 9 weights used in growth rate calculation. A complete listing appears on the last page.

Appendix 1

Listing of Weights Included in the Statistical Analyses

													Growth Rate			1
Gender	Regimen	Subject	Variable	Wgt1	Vgt2	Vgt3	Ng C4	Mgt5	Vgt6	Vgt7	H9t8	HB19	g/day	VBr_40	Wgt_48	Vgt_57
Female	DIIA+ARA	9712-0008	Weight (g) Age (weeks pca)	1590 34.0	1780 35.0	1990 35.8	2475						37.2	2960	4470	5760 57.1
female	DHA+ARA	9746-0002	Weight (9)	1249	1429	1597	1814	2110 36.7					30.1	2680 39.9	4010	5362 56.9
female	¥	9698-0501												3546	4880	
Female	至	9698-0502												3518	5972 47.9	
Female	¥	9698-0503												3390	4213	5319 57.1
Female	¥	9698-0504												3383	5234	6,667 57.9
female	至	9698-0505												3646	4638	5653 57.0
Female	¥	9699-0601												2582	4766	5731 57.0
Female	Ħ	2090-6696												4284	4823	5986 57.0
Female	¥	2090-6696												3716 40.0	4482	5674 56.7
Female	Ξ	7090-6696												3660	4738	6355 57.0
Female	¥	5090-6696												3433	5617 48.4	7603 57.6
Female	풒	9701-0501												3884	5630 47.7	6450 57.7

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Appendix 1

Listing of Weights Included in the Statistical Analyses

Vgt_57	6700 57.6	5085 57.4	6230 57.1	6630 56.7	6800 57.1	4530	6270 57.4	5320 57.0	7.72 57.7	7.72	5860 57.0	6360 57.1	7670 57.3
Vgt_48	5420 48.6	4565	5020	5540	5310 47.4	3430	5390 48.0	4210	6040	4050	4240	5260 48.1	5760 48.3
Wgt_40	3858 40.0	3430	3317 40.0	3302	2658 40.0	2895	3401	3141	3762 40.0	2718 40.0	2927 40.0	40.0	3390
Growth Rate g/day													
Vgt9													
Vgt8								_					
Hgt7													
Wgt6													
Hgt5													
Vgr4													
H9t3													
Ngt2													
Hgt1													
Variable													
Subject	9701-0502	9701-0503	9701-0504	9702-0501	9702-0502	9702-0503	9702-0504	9702-0505	9702-0506	9702-0507	9702-0508	9703-0501	9703-0505
Regimen	¥	Æ	M	¥	Æ	¥	E	Ŧ	ž	X	¥	至	¥
Gender	Female	Female	Female	Female	Female	f ema l e	Female	Female	Female	Female	Female	Female	f emale

Four subjects had more the 9 weights used in growth rate calculation. A complete listing appears on the last page.

Appendix 1

Listing of Weights Included in the Statistical Analyses

													Growth			
Gender	Regimen	Subject	Variable	Wgt1	VgtZ	Vgt3	Ngt4	WgtS	Vgt6	Vgt7	Wgt8	Vgt9		Wgt_40	Vgt_48	Vgt_57
female	¥	9703-0506												3405 40.0	6170 47.9	7490 56.9
Female	¥	9703-0507												3085	5090 48.0	6550 56.3
Female	¥	9704-0501												3194	4700	5880 57.4
Female	¥	9705-0501												3120 40.0	4500	\$702 \$7.1
Female	Ŧ	9705-0502												4080	6327	7348 57.3
Female	¥	9706-0501												3396	5000	6645 58.1
Female	¥	9706-0502												3041	4315	\$525 \$7.6
Female	¥	9707-0501												4653	5515	6770 56.6
Female	¥	9707-0502												3419	5500	7080 57.1
Female	¥.	9707-0503												3773	5785 47.9	7675 56.9
Female	¥	9707-0505												3716 40.0		
Female	¥	9708-0501												3688	5440	6890 57.6
female	至	9708-0502												3454 40.0	5192 48.1	5950 57.4

* Four subjects had more the 9 weights used in growth rate calculation. A complete listing appears on the last page.

Appendix 1

				Listing	of Veigh	Listing of Weights Included in the Statistical Analyses	ded in	the Stati	stical /	Inalyses						
Gender	Regimen	Subject	Variable	Wgt1	Ng t 2	Wgt3	Wgt4	WgtS	Ngt6	Vgt7	WgtB	Hgt9	Growth Rate g/day	Ngt_40	Wgt_48	VBt_57
Female		9708-0503												2977	5165 48.1	7040
Female	¥	9708-0504												3864	5660	6705 57.4
Female	¥	9708-0505												3831	5800	7435 57.6
Female	Ŧ	9709-0501												3550		
Female	¥	9709-0502												3715 40.0	5205 48.0	6100 56.9
Female	至	9709-0503									-			3195		
Female	Ŧ	9709-0504												3190	4590	
Female	¥	9050-6026												3505	48.0	5910 57.1

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* four subjects had more the 9 weights used in growth rate calculation. A complete listing appears on the last page.

Appendix 1

Listing of Weights included in the Statistical Analyses

Growth	day	26.1	39.6	9.6	22.1
ġ œ		2	m		1670 2 34.9
	IC17 WB				1680 1
	It 16 Vg				1640 1 34.6 3
	It15 Wg				1585
	3¢14 Vệ				34.3
	9¢13 W				1515
	Ngtio Ngtii Ngti2 Ngti3 Hgti4 Ngti5 Ngti6 Ngti7 Ngti8		2075		1510 34.0
	1gt 1 1 V	1465 33.0	2030 33.9		1450
	/gt10 4	1448 32.9	1994		1440
	Vgt9 1	1433 32.7	1938 33.6		1380 33.4
	WgtB	1402 32.6	1882 33.4	1070 32.1	1350 33.3
	Wgt7	1369 32.4	1858 33.3	1080 32.0	1265 33.0
	Vgt6	1330 32.3	1811 33.1	1060 31.9	1310 32.7
	Vgt5	1294 32.1	1778 33.0	1080	1310 32.4
	Wgt4	1291 32.0	1732 32.9	1080	1280 32.1
	Vgt3	1245 31.9	1699 32.7	1070	1185 31.7
	Vgt2	1221 31.7	1675 32.6	1050	
	Wgt1	1245 31.6	1649 32.4	1020	1075 31.1
	Gender Regimen SUBJECT Variable	Male Control 9712-0301 Weight (g) Age (weeks pca)	Male DIIA 9707-0307 Weight (g) Age (weeks pca)	Female Control 9698-0003 Weight (g) Age (weeks pca)	female DIIA+ARA 9705-0005 Weight (g) 1075 Age (weeks pca) 31.1
	Ger	H	Z.	Ā.	Ē

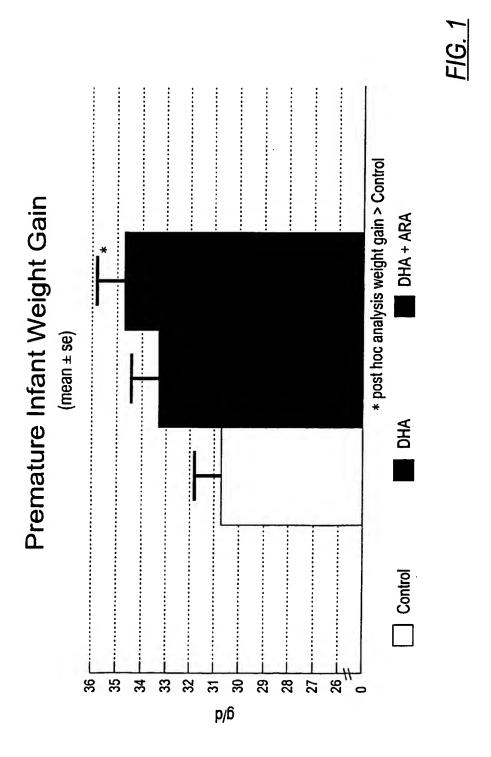
WO 98/44917 PCT/US98/10566

What is claimed is:

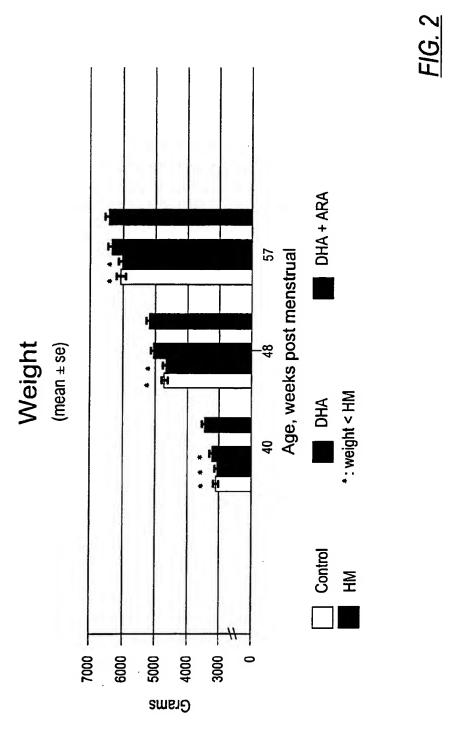
- 1. A method for enhancing the growth of preterm infants comprising administering to said infants a growth enhancing amount of DHA and ARA.
- 2. The method of Claim 1 wherein DHA and ARA are supplemented into infant formula.
- 3. The method of Claim 1 wherein the ratio of ARA:DHA is 1:2 to 5:1.
- 4. The method of Claim 1 wherein the ratio of ARA:DHA is 1.1 to 3:1.
- 5. The method of Claim 1 wherein the ratio of ARA:DHA is about 2:1.
- 6. The method of Claim 2 wherein the infant formula comprises DHA in an amount of about 2 mg/100 kcal to about 50 mg/100 kcal and ARA in an amount of about 4 mg/100 kcal to about 100 mg/100 kcal.
- 7. The method of Claim 2 wherein the infant formula comprises DHA in an amount of about 5 mg/100 kcal to about 33 mg/100 kcal and ARA in an amount of about 10 mg/100 kcal to about 67 mg/100 kcal.

WO 98/44917 PCT/US98/10566

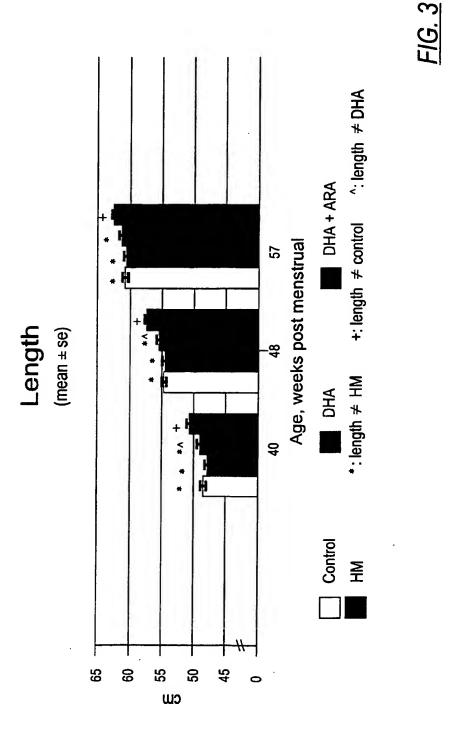
- 8. The method of Claim 2 wherein the infant formula comprises DHA in an amount of about 15 mg/100 kcal to about 20 mg/100 kcal and ARA in an amount of about 30 mg/100 kcal to about 40 mg/100 kcal.
- 9. The method of Claim 1 wherein the amount of time to achieve growth equivalent to normal terms breast fed infants is less than 9 months corrected age.
- 10. The method of Claim 1 wherein the amount of time to achieve growth equivalent to normal terms breast fed infants is less than 6 months corrected age.
- 11. The method of Claim 1 wherein the amount of time to achieve growth equivalent to normal terms breast fed infants is less than 4 months corrected age.
- 12. The method of Claim 1 wherein the amount of time to achieve growth equivalent to normal terms breast fed infants is less than 2 months corrected age.
- 13. The method of Claim 1 wherein the amount of time to achieve growth equivalent to normal terms breast fed infants is no greater than term corrected age.



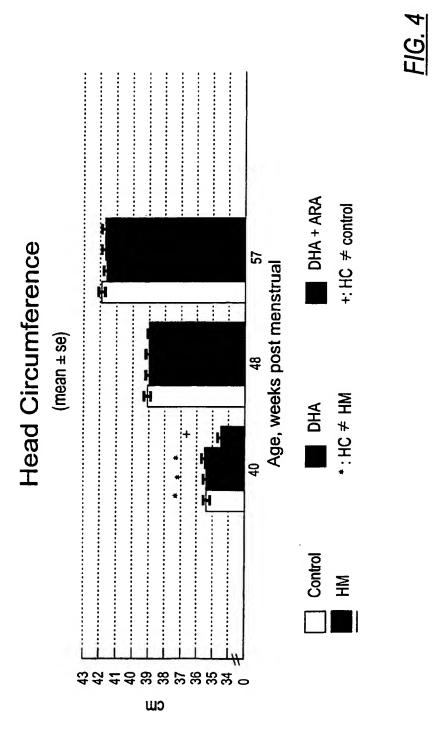
2/6



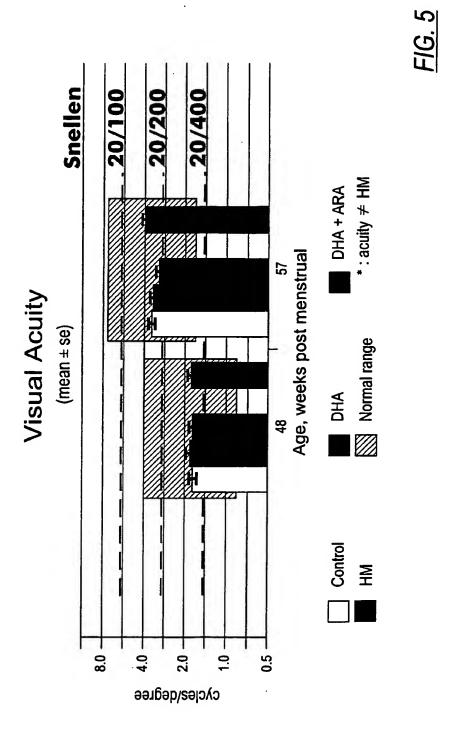




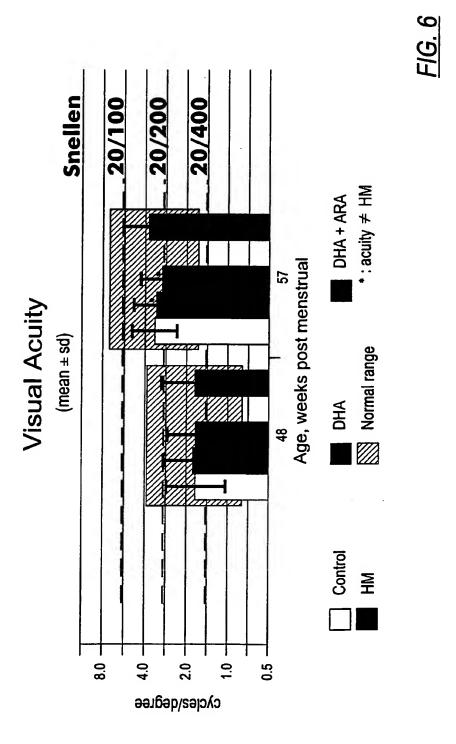




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INTERNATIONAL SEARCH REPORT

tr ational Application No PCT/US 98/10566

A. CLASSIFICATION OF SUBJECT MATTER IPC 6 A61K31/20 According to International Patent Classification (IPC) or to both national classification and IPC **B. FIELDS SEARCHED** Minimum documentation searched (classification system followed by classification symbols) IPC 6 A61K Documentation searched other than minimum documentation to the extent that such documents are included in the fields searched Electronic data base consulted during the international search (name of data base and, where practical, search terms used) C. DOCUMENTS CONSIDERED TO BE RELEVANT Citation of document, with indication, where appropriate, of the relevant passages Relevant to claim No. Α INNIS S.M.: "Essential fatty acid 1 - 13requirements in human nutrition" CAN.J.PHYSIOL.PHARMACOL., vol. 71, no. 9, September 1993, CANADA, pages 699-706, XP002073826 see abstract see page 705, right-hand column, last paragraph X CROZIER G.L. ET AL.: "Metabolism of long 1-13 chain polyunsaturated fatt acids and infant nutrition" MONATSCHRIFT FÜR KINDERHEILKUNDE, vol. 143, no. 7(SUPPL.2), 1995, GERMANY, pages 95-98, XP002073827 see abstract -/--Further documents are listed in the continuation of box C. Patent family members are listed in annex. Special categories of cited documents: "T" later document published after the international filing date or priority date and not in conflict with the application but "A" document defining the general state of the art which is not considered to be of particular relevance cited to understand the principle or theory underlying the Invention "E" earlier document but published on or after the international "X" document of particular relevance; the claimed invention cannot be considered novel or cannot be considered to involve an inventive step when the document is taken alone "L" document which may throw doubts on priority claim(s) or which is cited to establish the publication date of another-citation or other special reason (as specified) "Y" document of particular relevance; the claimed invention cannot be considered to involve an inventive step when the document is combined with one or more other such docu-ments, such combination being obvious to a person skilled in the art. "O" document referring to an oral disclosure, use, exhibition or other means document published prior to the international filling date but later than the priority date claimed "&" document member of the same patent family Date of the actual completion of theinternational search Date of mailing of the international search report 6 August 1998 01/09/1998 Name and malling address of the ISA Authorized officer European Patent Office, P.B. 5818 Patentiaan 2 NL - 2280 HV Rijewijk Tel. (+31-70) 340-2040, Tx. 31 651 epo ni, Economou, D Fax: (+31-70) 340-3016

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INTERNATIONAL SEARCH REPORT

Irr Itlenal Application No
PCT/US 98/10566

P,X CLANDININ M.T. ET AL.: "Assessment of the Efficacious Dose of Arachidonic Acids in Preterm Infant Formulas: Fatty Acid Composition of Erythrocyte Membrane Lipids" PEDIATRIC RESEARCH, vol. 42, no. 6, December 1997, USA, pages 819-825, XP002073828 see abstract see table 2 see table 3 see page 821, right-hand column, paragraph 3 - page 822, left-hand column, paragraph 1 X KOLETZKO B. ET AL.: "Fette in der Ernährung von Neugeborenen mit niedrigem	Relevant to claim No.
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